

EMPLOYEE HAZARD REPORT (Stage I)

PART 1 - TO BE COMPLETED BY THE EMPLOYEE AND GIVEN TO YOUR SUPERVISOR	
TO:	FROM:
WORKPLACE:	
DESCRIPTION OF HAZARD OR SAFETY CONCERN:	
RECOMMENDED SOLUTION:	
SIGNATURE:	DATE:
PART 2 - TO BE COMPLETED BY THE SUPERVISOR WITHIN THREE (3) WORKING DAYS OF THE ABOVE DATE	
<input type="checkbox"/> AGREE	<input type="checkbox"/> DISAGREE
STATE REASON(S) AND PLANNED ACTION:	
TIME FRAME FOR ACTION:	
SIGNATURE: c.c. - Employee	DATE:
PART 3 - TO BE COMPLETED BY WORKER WITHIN TWO (2) WORKING DAYS	
1. My Supervisor's Response and Planned Action Outlined has: <input type="checkbox"/> Resolved My Concern <input type="checkbox"/> Not Resolved My Concern	
2. Supervisor Files Report on the Health and Safety Board or	Supervisor forwards copy to the Workplace Health and Safety Committee
SIGNATURE:	DATE:

WORKPLACE HEALTH & SAFETY COMMITTEE HAZARD REPORT (Stage II)

<i>PART 1 - TO BE COMPLETED BY WORKPLACE HEALTH AND SAFETY COMMITTEE WITHIN THREE DAYS (3) WORKING DAYS</i>	
WORKPLACE:	
RE:	
<input type="checkbox"/> EMPLOYEE HAZARD REPORT (Stage I) ATTACHED	
DESCRIPTION OF HAZARD OR SAFETY CONCERN:	
RECOMMENDED SOLUTION:	
RECOMMENDED TIME FRAME:	
1. Supervisor	(Signature)
2. Academic Representative	(Signature)
3. Non-Academic Representative	(Signature)
c.c. to Employee	Date:
<i>PART 2 - TO BE COMPLETED BY THE WORKER WITHIN TWO (2) WORKING DAYS</i>	
1. The solution recommended above has:	
<input type="checkbox"/> Resolved My Concern <input type="checkbox"/> Not Resolved My Concern	
2. Supervisor Files Report with the Health and Safety Board or	Supervisor forwards copy to the Joint Health and Safety Action Group
SIGNATURE:	DATE:

JOINT HEALTH & SAFETY ACTION GROUP HAZARD REPORT (Stage III)

<i>PART 1 - TO BE COMPLETED BY JOINT HEALTH AND SAFETY ACTION GROUP WITHIN THREE DAYS (3) WORKING DAYS</i>	
WORKPLACE:	
RE:	
<input type="checkbox"/> WORKPLACE HEALTH & SAFETY COMMITTEE HAZARD REPORT (Stage II) ATTACHED	
DESCRIPTION OF HAZARD OR SAFETY CONCERN:	
RECOMMENDED SOLUTION:	
RECOMMENDED TIME FRAME:	
1. Action Member:	(Signature)
2. Supervisor:	(Signature)
3. One Health & Safety Representative	(Signature)
c.c. to Employee	Date:
<i>PART 2 - TO BE COMPLETED BY THE WORKER WITHIN TWO (2) WORKING DAYS</i>	
1. The solution recommended above has:	
<input type="checkbox"/> Resolved My Concern <input type="checkbox"/> Not Resolved My Concern	
2. Supervisor Files Report with the Health and Safety Board or	Supervisor forwards copy to the Joint Health and Safety Co-chairperson(s).
SIGNATURE:	DATE:

JOINT HEALTH AND SAFETY COMMITTEE HAZARD REPORT (Stage IV)

<i>PART 1 - TO BE COMPLETED BY THE JOINT HEALTH AND SAFETY COMMITTEE WITHIN TWO (2) WORKING DAYS</i>	
WORKPLACE:	
RE:	
<input type="checkbox"/> JOINT HEALTH & SAFETY ACTION GROUP HAZARD REPORT (Stage III) ATTACHED	
DESCRIPTION OF HAZARD OR SAFETY CONCERN:	
RECOMMENDED SOLUTION:	
RECOMMENDED TIME FRAME:	
Co-chairperson (1)	(Signature)
Co-chairperson (2)	(Signature)
c.c. to Employee	Date:
<i>PART 2 - TO BE COMPLETED BY THE WORKER WITHIN ONE (1) WORKING DAY</i>	
1. The solution recommended above has:	
<input type="checkbox"/> Resolved My Concern <input type="checkbox"/> Not Resolved My Concern	
2.Co-chairpersons files report with the Health & Safety Board. or	Co-chairpersons forward copy to the Director of Education.
SIGNATURE:	DATE:

DIRECTOR OF EDUCATION HAZARD REPORT (Stage V)

<i>PART 1 - TO BE COMPLETED BY THE DIRECTOR OF EDUCATION WITHIN ONE (1) WORKING DAY</i>	
WORKPLACE:	
RE:	
<input type="checkbox"/> JOINT HEALTH & SAFETY ACTION GROUP HAZARD REPORT (Stage IV) ATTACHED	
DESCRIPTION OF HAZARD OR SAFETY CONCERN:	
RECOMMENDED SOLUTION:	
RECOMMENDED TIME FRAME:	
Director of Education	(Signature)
c.c. to Employee	Date:
<i>PART 2 - TO BE COMPLETED BY THE WORKER WITHIN ONE (1) WORKING DAY</i>	
1. The solution recommended above has:	
<input type="checkbox"/> Resolved My Concern <input type="checkbox"/> Not Resolved My Concern	
2. Director of Education files report with the Health & Safety Board. or	The employee may contact the Ministry of Labour.
SIGNATURE:	DATE: