



Occupational Health and Safety Concern Form

This concern form is to report a potential or existing hazard which you believe presents a risk to the health or safety of individuals in your workplace. Please submit to your Principal or Supervisor and keep a copy for your records. Any hazard which is identified as immediately dangerous to life or health must be brought to the Principal/Supervisor's attention without delay and all steps reasonable to control the hazard must be taken immediately.

Section 1 – (To be completed by worker)

Name of worker:	School/location:
Room/area of concern:	Date submitted to principal/supervisor:

Health and Safety Concern
Describe the concern, its background and possible suggestions for resolution:

Section 2 – (To be completed by principal/supervisor)

Response from Principal/Supervisor – within 7 working days (holidays excepted) of receipt from worker
Identify the corrective action proposed or taken
Actions taken: None required HS Facilities Other (specify) _____

Signature of principal/supervisor	Date Concern Form returned to Worker:
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Section 3 – (To be completed by worker)
Issue Resolved _____ Unresolved _____

After Section 3 is completed, worker is to forward a copy to ETFO Health and Safety Site Representative. If the issue is unresolved forward a copy to either Mike Thomas (mthomas@etfothamesvalley.com) or Sue Varley (svarley@etfothamesvalley.com) at the Local office. Keep a completed copy of the form for your records.