Safety and Health Hazard Identification

Hudson City School District is committed to providing a safe and healthy environment for both our employees and our students. Your suggestions for making this an even safer place to work and learn are welcomed.

Students or district employees who identify a potentially-hazardous condition/activity, or have a suggestion for improving safety performance are encouraged to complete this "Safety Suggestion/Environmental Quality Reporting Form" and submit it to the Safety and Health Designee.

Location of Curre	nt Practice/Situation
Building Name	Room #:
Current Practice/	Situation – If applicable
Recommendation	(s) – Include projected materials, equipment, and/or supplies, retraining, etc.
Desired Results	
All suggestions b	ecome the property of the District
Name:	Date:
Department:	Ext:
Signature:	
Thank you for tak administrator.	ing the time to contribute your suggestion. This form should be returned to the building
Follow-up Action	Date:
Distribute to:	Safety & Health Designee Building Administrator Safety Committee Other

Note: Hazards that may pose an immediate danger to an employee, student or visitor are to be reported to an administrator as soon as they are discovered.