

The guidelines for our company safety program include providing the opportunity for all Employee's to make suggestions and recommendations concerning safety and health. Employees may also remain anonymous by completing the "Suggestions/Comments" portion and inserting the form into the safety suggestion drop box.  
(This form is for items not requiring a work order.)

Date: \_\_\_\_\_

Name: (optional) \_\_\_\_\_

Department: \_\_\_\_\_

Suggestions/Comments:

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Response:

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Signature: (optional) \_\_\_\_\_

Note: Please return your suggestion form to Human Resources with your name and department in case a response is needed.