

TARLETON STATE UNIVERSITY

SAFETY AWARENESS PROGRAM

Date:

The following unsafe condition/act was observed:

Place where condition/act was observed:

Date of observation:

What could happen if this condition continues?

Name (optional):

Department:

You will receive a response within 10 days. Final solutions may take longer, but you will be kept informed of the progress. If you do not receive an answer in a timely manner, please call the Department of Risk Management & Safety at 968-9237 or 968-9898.

Thank you for your participation in this program and for your desire to help make Tarleton a safer workplace.

*Return form to Risk Management & Safety, Box
T-0830***For Risk Management & Safety Office Use**

Received by RM&S – Date: _____

Action: _____

Forwarded to: _____

Date: _____

Remarks: _____