

Operational Services

Exhibit – Site Safety Interview Report

Site Safety Interview Report

Complete and return to the Personnel Department.

Committee Members (check all that apply)

MIS/VIC

Building Site Supervisor (Principal or designee)

Personnel Department Representative

Building Services Representative

Cafeteria Supervisor

Custodian Supervisor

Other:

Employee filing Injury Report: _____

Date of Injury: _____

Date of safety investigation: _____

Method of investigation (check all that apply)

Re-enactment

Video Tape

Other:

Audio Tape

Anecdotal record

Other:

Committee Report:

Committee Signatures:

Date Submitted: _____

Adopted: 2/13/95

Revised: 2/8/00

Reviewed: 12/12/95, 2/27/96