

## **EMPLOYEE SAFETY NOTIFICATION**

This form is to be used by employees to provide a safety suggestion or report any unsafe action or condition. You may complete this and drop it at any Blue Ribbon office, fax, mail or email to: [Safety@blueribbonpersonnel.com](mailto:Safety@blueribbonpersonnel.com)

Thank you, we appreciate your participation in a safe working environment.

Please describe the unsafe action(s) or condition(s):

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And/or do you have a suggestion(s) to improve safety:

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Has this been reported to a Blue Ribbon Supervisor?

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If so when, and to whom?

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Has this been reported to a client Supervisor?

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Employee name (optional): \_\_\_\_\_

Department (if applicable): \_\_\_\_\_

### **Employee Protection Notification**

Use of this form or other method to report unsafe actions/conditions is protected by law. It is illegal for an employer to take any action against an employee in reprisal for exercising his/her rights to participate in communications involving safety. We will investigate any report or question as required by the Injury/Illness Prevention Program standard (title 8, C.C.R. Sec. 3203) and advise the employee who initiated the process, or all workers in the area, of the employer's response.