

Health and Safety Concern Form

A **health and safety concern** is defined as a potential or existing hazard which presents risk to the health or safety of individuals in the workplace.

All ETFO members are encouraged to bring to the attention of their immediate Administrator, either directly or through their Union representatives, any occupational health and safety concerns.

Your work site's ETFO Health and Safety Rep. or ETFO's Local Health and Safety Committee members are available for assistance in completion of this Health and Safety Concern form.

In completing the form, you should describe the concern, its background and any suggestions for resolution, and then submit it to your immediate Administrator. Please retain a copy.

If you have not received a response from the Administrator after 21 days of having submitted this form, you are requested to contact the ETFO Thames Valley Teacher Local office (local 519-474-3150, long distance 1-800-288-2682).

ETFO Member's Name:

Work Site:

Administrator's Name:

Health and Safety Concern

Describe the concern, its background, and suggestions for resolution.
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Attach additional pages as needed.

Date the Health and Safety Concern Form is submitted to the Administrator:

Administrator's Response

Date the Health and Safety Concern Form was received by the Administrator:

The Administrator shall respond with action taken in the space below within 21 days of receipt of this Health and Safety Concern Form (c.f. Occupation Health & Safety Act).

Date of Administrator's Response:	Administrator's Signature:
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Date of receipt of response to ETFO member:
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RETAIN A COPY OF THIS FORM BEFORE SUBMITTING IT TO YOUR ADMINISTRATOR.
