Instructions: This must be filled out and signed by all persons present at the meeting. Meetings must be conducted every 10 days and workplace safety issues must be discussed along with a prepared topic.

DATE:_____

SUPERVISOR_____

TOPIC DICUSSED

_____

_____

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_____

OTHER SAFETY ISSUES RAISED BY EMPLOYEES

_____

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_____

NAMES & SIGNATURES OF EMPLOYEES PRESENT

NAMES	SIGNATURES