

# St. Francis Area Schools

4115 Ambassador Boulevard NW, St. Francis MN 55070  
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## Safety/Injury Prevention Suggestion Form

St. Francis Area Schools encourages employees to be involved in the future success and growth of the safety program by identifying hazards and/or providing recommendations for a safety improvement.

The following suggestion provides information regarding either a safety improvement or the recognition of a safety hazard which will prevent injury and promote a safe working environment. Please include as much information as possible.

Name (optional) \_\_\_\_\_

Date of report \_\_\_\_\_ Time of report \_\_\_\_\_

Contact information (phone, email – optional) \_\_\_\_\_

### Type of Safety Concern

Check only one – complete additional forms for other violations or observations

- General health and safety                       Environmental  
 Security  
 Fire code     Other \_\_\_\_\_

### Description of Safety Concern

Location/Building \_\_\_\_\_ Room # \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_

Please describe the condition you observed. Can you suggest a solution? If so, describe.

#### OFFICE USE ONLY

Date submission was Reviewed Injury Prevention Team \_\_\_\_\_

Response action

Return form to Human Resources, Central Services Center