



*Individual Achievement in Safety Award Application Continued*

- b.  Total number of employee hours worked during calendar year 2022  
The actual number of hours worked during the calendar year by all employees, full-time, part-time, temporary, seasonal, etc. (Do not give weekly or monthly numbers.) \_\_\_\_\_
- c.  Total number of cases involving days away from work during calendar year 2022. Use the total figure from OSHA Form 300 - column H \_\_\_\_\_
- d.  Total number of recordable cases during calendar year 2022  
Use columns H, I and J from OSHA Form 300. \_\_\_\_\_
- e. Do you have a safety committee that meets at least quarterly, has established a system for safety suggestions from employees, reviews workplace injury and illness reports and makes recommendations to management?  Yes  No
- f. Do you have and follow a written general safety and health program that has been formally reviewed during the last year?  Yes  No
- g. Do you have a written plan that helps prepare your employees for workplace emergencies?  
 Yes  No
- h. Does your organization perform periodic safety and health inspections?  Yes  No
- i. Does your organization provide employee safety training on all applicable OSHA-required topics?  
 Yes  No
- j. Has your organization sustained any work-related fatalities during the last three years?  
 Yes  No

I certify that the information contained in this application is accurate and correct.

Reported by: \_\_\_\_\_  
Print Name Signature  
\_\_\_\_\_  
Title Date

**Entries must be received no later than June 30, 2023**  
**Please use "2023 AWARDS SUBMISSION" in the subject line**