Sample Format - Joint Health and Safety Committee Recommendation Form

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| To:From: |  Date: **Joint Health & Safety Committee** |
| *(Co-Chair Signature – Employer Representative) (Co-Chair Signature – Worker Representative)*Please respond by: *(Within 21 calendar days.)* |
| **OH&S Issue:** *(Give a short, clear and complete description of the issue. Describe what, why, who, where and when.)* |
| **Committee Recommendation: (attach a separate sheet if necessary) (***Make sure the recommendation deals with workplace health and safety. Include reasons for your recommendation. For complex issues, list options, steps involved and suggested time frame for implementation/completion.)***cc: Appropriate Manager, Safety Coordinator, CEO, etc.** |
| **Employer Response: (attach a separate sheet if necessary)** *(Note to employer: In your response, if you accept this recommendation please completion. If you reject the recommendation please include your reasons.)***Signature:** | *include a time frame for* |
| (Department Head or Designate)**Date Returned:****Committee Comments*:*** *(Note any follow-up or additional action required by the Committee.)* |
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