Department of Labor and Industries Division of Occupational Safety and Health www.lni.wa.gov/safety - 1-800-423-7233



## **SAFETY MEETING MINUTES**

The record for this safety meeting must be	kept for one year.		Page 1 of 2
Employer			
Worksite location			
Meeting date:	Meeting start tii	me: Meeting end time:	<u>-</u>
Attendance			
(M)anagement (E)mployee		M	M
		E	E
Examples: John Smith	M	M	М
Mary Brown	E	E	M E
		<u> </u>	
	<u>M</u> E	M     E	<u>M</u> E
		E	E
	M	M	M
	E	E	E
	M	M	M
	E	E	E
Agenda:			
Review minutes of our previous meeting	g dated /	/ for corrections/approval.	
Progress report on last meeting's "To	Do' list:		
□ D: 1 1 10:			
Discuss hazards, concerns, self-inspect	ions, other inspection	ons, etc., since our last meeting.	

Department of Labor and Industries Division of Occupational Saftey and Health www.lni.wa.gov/safety - 1-800-423-7233



## **SAFETY MEETING MINUTES**

The record for this safety meeting must be kept for one year. Page 2 of 2 Review accident/near miss reports to determine if causes were identified and corrected Meeting date: Meeting start time: Meeting end time: Suggested updates to our Accident Prevention Program Other To Do List: Due: Assigned to: Minutes written by Meeting leader (signature) Lisa Beach Date next meeting Start time Location Additional attendance, members absent, guests (from front) or other notes: