APPENDIX D-5

Safety Committee Meeting Minutes

Scho	ol:	Building:	
Date:			
Elected Members Present:			
Appointed Members Present:			
Review minutes of last meeting. Approved? Yes No			
Corrections and/or additions to the minutes:			
1.	Unfinished business from last meeting:		
2.	Any hazards reported since the last meeting:		
3.	Review all employee accidents reported since the last meeting. Was the unsafe action or condition identified and corrected? A copy of the supervisor's report is to be reviewed by the Safety Committee.		
4.	Review student accidents reported since the last meeting. Was the unsafe action or condition identified and corrected? (Review of student accidents is not required by WISHA but is recommended by Dept. of Health.)		
5.	Is our safety and accident prevention program working? What improvements would you suggest?		
6.	What other safety-related topics did you cover in this meeting?		
Date & time of next meeting:			
Location of next meeting:			
Minutes prepared by:			
Committee Chairperson:			