

## Safety Committee Meeting Minutes

Meeting Date: \_\_\_\_\_

Time: \_\_\_\_\_

Committee Members Present:

Name:

Position:

---

---

---

---

---

---

---

---

---

---

---

---

Review and Status of Old Business:

Recent accidents:

Safety Concerns:

Safety Education for Staff:

New Business:

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Next meeting and Location: \_\_\_\_\_