

# SNS Safety Concern Report

## How To Use This Form

This form may be used to report safety concerns and issues, unsafe conditions, or safety improvement suggestions. Fill in each section as completely and with as much detail as possible. Use the back side of this form or additional sheets if more space is needed. When complete, submit the form to either/or:

- Mitchell Reid, Academic Environmental Health & Safety Specialist
- Your supervisor

***Do not use this form to report immediate emergencies or hazards!***

***Report emergencies and hazards as quickly as possible by calling the appropriate number below:***

<b><u>Emergencies</u></b>	<b>call 9-1-1</b>	
<u>Hazards</u>	CSUMB EMHS:	582-3730
	University Police Department:	582-3360

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Department: \_\_\_\_\_ Phone: \_\_\_\_\_

*(The above information is not required if you wish to submit this form anonymously.)*

Describe issue, condition, or suggestion: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Form Submitted To: \_\_\_\_\_ Date: \_\_\_\_\_  
Form Received by EHS: \_\_\_\_\_ Date: \_\_\_\_\_

*(Use the back side of this form or additional sheets to continue. Please do not write below this line)*

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Response By: \_\_\_\_\_ Date: \_\_\_\_\_  
Response Posted At: \_\_\_\_\_

Response: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_