



Please use this form to make a safety suggestion  
**Reports may be made anonymously.**

Campus/Center \_\_\_\_\_

Building Name \_\_\_\_\_ Room Number / Description \_\_\_\_\_

Department \_\_\_\_\_

Your suggestion for improving the situation described above

\_\_\_\_\_

Has this matter been reported to the supervisor in the hazard area? Yes \_\_\_ No \_\_\_

Provide SchoolDude # \_\_\_\_\_

If you include your name, we will update you on action taken, but it is not required.

Your Name and Extension (Optional) \_\_\_\_\_

Your Department (Optional) \_\_\_\_\_

Employees are advised that use of this form or other reports of unsafe conditions or practices are protected by law. It is illegal for the employer to take action against an employee in reprisal for exercising rights to participate in communication or safety activities.

The District will investigate any hazard report or safety question from employees as required by the Injury and Illness Prevention Program.