Dept./Division

Unit Safety Committee

Date:

**Agenda for meeting #**

To: (Each unit safety committee member, alternates, bulletin board, etc.)

Scheduled meeting date and time:

Location meeting will be held:

Order of Agenda Items

Old Business:

1. Review/approval of minutes from last meeting.
2. Confirm date and time for next meeting
3. Review of items previously discussed: Person responsible

a.

b.

c.

d. Review unit accident report

New Business:

a.

b.

c.

*Revised 2022-01-20*