SAFETY COMMITTEE

MEETING MINUTES FORM

1 MEETING INFORMATION

DATE: _____

TIME: _____

WORKSITE LOCATION: _____

MEETING FACILITATOR: _____

MINUTES TAKEN BY: _____

OPEN ACTION ITEMS	HAZARDS IDENTIFIED	NEAR MISSES REVIEWED	TRAININGS COMPLETED
_____	_____	_____	_____

2 ATTENDANCE

MEMBERS PRESENT:	
MEMBERS ABSENT:	
GUESTS:	

3 AGENDA & APPROVAL

CALLED TO ORDER BY: _____

REVIEW AND APPROVE PREVIOUS MEETING MINUTES:	☐ APPROVED ☐ APPROVED WITH REVISIONS

4 PREVIOUS MINUTES ACTION ITEMS

ACTION ITEM	RESPONSIBLE PERSON	DUE DATE	STATUS	COMMENTS

DISCUSSION NOTES:

5 INCIDENTS & NEAR MISS REPORTS

DEPT/AREA	DATE	CAUSES/DESCRIPTION	CORRECTIVE ACTIONS

DISCUSSION NOTES:

6 HAZARDS AND INSPECTION REPORTS

DISCUSSION NOTES:

7 SAFETY TOPICS AND DISCUSSIONS

TRAINING COMPLETED SINCE LAST MEETING:	
UPCOMING TRAINING:	
SAFETY CONCERNS:	

8 NEW BUSINESS

TOPICS DISCUSSED:

RECOMMENDATIONS:

9 ACTION ITEMS

ACTION ITEM	RESPONSIBLE PERSON	DUE DATE	STATUS	COMMENTS

DISCUSSION NOTES:

10 NOTES

NEXT MEETING:

The next meeting will be held on _____ at __:__AM/PM
Motion to adjourn was made at __:__ a.m /p.m. and was passed unanimously.