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| **AF 3813**  **Bluewater District School Board**  351 1st Ave. N., Box 190, Chesley, Ontario N0G 1L0 (519) 363-2014 or 1-800-661-7509 Fax (519) 370-2909  **WORKER HEALTH AND SAFETY CONCERN FORM**  The purpose of this form is to allow everyone to do their part to keep our workplace safe. By reporting safety concerns you can help prevent larger incidents from occurring. Please do your part to help everyone enjoy a safe place to work, learn, and live.  **Note: If the hazard presents an imminent danger to you or someone else, you must inform your Supervisor IMMEDIATELY.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** Under [Section 28](https://www.ontario.ca/laws/statute/90o01#BK45) of the OHSA, a worker shall report to their employer or supervisor any contravention of the Act or regulations or the existence of any hazard of which they are aware of. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name: | | |  | | | | | | | | | | | | | | |  | |  |  | Date (yyyy/MMM/dd): | | | | | |  | | | | | |  |
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|  | Name of Workplace: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  | Specific Area of Concern: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  | Repeat Item?: | | | | Yes | |  | | | No | |  | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  | Prior to posting this form on the Health and Safety Board, please remove the top portion of this form (cut along dotted line) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | **Description of Concern** *(Include an explanation as to how the hazard may impact the health and/or safety of a worker.DO NOT include names):* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | **Supervisor Response to Concern** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Supervisor Name | | | | | | | | | | | | | | | | |  |  | |  | Date (yyyy/MMM/dd) | | | | | | | | | | |  |  |  |
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|  | Supervisor Signature | | | | | | | | | | | | | | | | |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **NOTE:**  Under [Section 50](https://www.ontario.ca/laws/statute/90o01#s50s1) of the OHSA, an employer cannot dismiss (or threaten to dismiss) a worker, discipline or suspend a worker (or threaten to do so), impose (or threaten to impose) any penalty upon a worker, or intimidate or coerce a worker because a worker has either followed the OHSA and regulations, exercised rights under the OHSA, including the right to refuse unsafe work or asked the employer to follow the OHSA and regulations. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Approved 2016.06.08 AP 3801-D; AP 3804-D | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |