SAFETY COMMITTEE MEETING

Date	Time			
Organization				
Location				
Chairperson				
MEMBERS PRE	SENT			
Write the names of tho	se in attendance at this meeting. If needed, also make note of who was not able to make it to	the meeting.		
APPROVE MINUTES FROM LAST MEETING				
Note here that the minutes were approved or write down any changes to the minutes.				
ACTION ITEMS COMPLETED				
Provide action item number, date completed, and any relevant notes.				
ACTION ITEMS NOT COMPLETED				
Provide action item nu	nber, reason not completed, and any relevant notes. Add to new action items list if completio	n is still pending.		

SAFETY COMMITTEE MEETING

NEW BUSINESS				
Review inspections, inc	idents, near misses, training, safety meetings, and new recommendation	ns.		
NEW ACTION ITEMS				
OTHER NOTES Add anything else discussed including reminders, progress updates, and items that should be added to the next meeting's agenda.				
NEXT MEETING				
Date		Time		
Location				
MINUTES PREPARED BY				
Name	Signature			