Portland Community College

Safety Committee Minutes

Campus/Center: _____ **Bldg/Room:** _____

Date: _____ **Time:** _____

The Safety Committee Meeting was opened by _____ Chairperson, with the following members in attendance:

	MEMBER NAME	***WORK TITLE***	***COMMITTEE POSITION***
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

☐ The minutes of the previous meeting were read and adopted as read or changed per the Committee amendments.

Old Business: ***ACTIONS COMPLETED***

- Item: _____
  _____
- Item: _____
  _____
- Item: _____
  _____
- Item: _____
  _____

Regular Business:

Medical Incident Report: _____
_____
_____
_____

Hazardous Safety Conditions Report: _____
_____
_____
_____

Inspection Reports: _____
_____
_____
_____

Review of Emergency Team listing; Building Coordinator and Floor Monitor lists; monthly building evacuation procedures: _____
_____
_____

New Business: ***ACTIONS TO BE ADDRESSED***

- Item: _____

  _____

- Item: _____

  _____

- Item: _____

  _____

- Item: _____

  _____

Upcoming Safety Training and Dates: _____

_____

_____

_____

Round Table Discussion: _____

_____

_____

_____

_____

_____

_____

Safety & Risk Services Report: _____

_____

_____

_____

NEXT Meeting—Time and Date: _____