



Notice Dangerous Situation

HS7

IDENTIFICATION

School: _____ Date: _____

Name: _____ Employee Number: _____

Occupation: _____

DESCRIPTION OF THE PROBLEM:

WITNESS: _____

WAS THE PRINCIPAL NOTIFIED OF THE SITUATION? No Yes When: _____

RECOMMENDATIONS:

Worker's signature: _____ Date: _____ Time: _____
year/month/day a.m./p.m.

I declare that I have taken notice of the present document.

Signature: _____ Date: _____ Time: _____
Immediate supervisor or replacement year/month/day a.m./p.m.