



Safety and Health Program

Download additional self-inspection checklists at <http://engineering.tamu.edu/safety/>

Date _____
 Inspector _____
 Faculty/PI _____

Room No. _____
 Location _____
 Dept. _____

Items for evaluation	Yes	No	Comments	Action to be taken
Do you have an active safety and health program in operation for this work area?				
Is your program documented?				
Is one person clearly responsible for the overall activities of the safety and health program?				
Do you have a safety committee or group made up of management and labor representatives that meets regularly and reports in writing on its activities?				
Do you have a working procedure for handling in-house employee complaints regarding safety and health?				
Are you keeping your employees advised of the successful effort and accomplishments you and/or your safety committee have made in assuring they will have a workplace that is safe and healthful?				