

**Health and Safety Committee
Request for Input Form**

Health and/or safety issue. (Include location): _____

How is this issue affecting your health and/or safety? _____

How is this affecting the health and/or safety of others in the building? _____

Steps you have taken to correct situation: _____

Signature: _____ **Date:** _____

**ALL ISSUES SHOULD FIRST BE ADDRESSED BY YOUR BUILDING PRINCIPAL
OR YOUR SUPERVISOR.**

Return form to Nina Tomasello, R.N., Senior High School