

Joint Health and Safety Committee
NOTICE OF RECOMMENDATION

Recommendation No.	Submitted to:
	Date submitted:
	Department:
Re: (Details of the issue/hazard, including information about where, when and who it applies to)	
We recommend: (If known, provide recommendations that address the root causes of the issue.)	
Reason(s) for recommendation(s): (Consider applicable information from sources such as the hazard assessment, legislation, trend analysis, direct/indirect costs, etc.)	

Signed

Worker Co-Chair

Management Co-Chair