

ESCONDIDO UNION SCHOOL DISTRICT

**Report of Safety concern**

Date \_\_\_\_\_ Reported by \_\_\_\_\_

Site \_\_\_\_\_ Job Title \_\_\_\_\_

Safety Concern: \_\_\_\_\_

I believe this safety issue requires immediate attention because (check one or more):

- \_\_\_\_\_ Hazard to student/staff
- \_\_\_\_\_ Unsafe Playground Equipment Needs Repair
- \_\_\_\_\_ Unsafe Equipment Needs Repair
- \_\_\_\_\_ Unsafe Work Practice Because \_\_\_\_\_

Location of hazardous area at site: \_\_\_\_\_

The best time to reach me is: \_\_\_\_\_

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For Site Administrator's Use

STATUS REPORT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Site Administrator's Signature Date

Distribution: Immediate Supervisor, Principal or Department Administrator, Assistant Superintendent of Business Services, Association President, Site Copy, Copy of Status to Reporting Employee