

REGISTRATION FORM

Health & Safety Training

Sunday, November 13, 2022 – Friday, November 18, 2022

Linden Hall, 432 Linden Hall Road, Dawson, PA 15428

Registration: Sunday at 4:00 pm followed by dinner at 6:00 pm

****All registrants are to bring a copy of their Collective Bargaining Agreement and to complete the enclosed Health and Safety Survey and return it with your registration form!**

LOCAL UNION # _____ CONTACT TELEPHONE # _____

Please Print

Name(s)	Title	Overnight? Yes or No	Smoking Room? Yes or No	Email Address
1.				
2.				
3.				
4.				
5.				

Please find registration fee(s) for _____ member(s) at **\$400** each staying overnight.

Please find registration fee(s) for _____ member(s) at **\$200** each not staying overnight.

United Steelworkers' will require social distancing at ALL times inside the building and in the meeting rooms. (Subject to change)

Make Check Payable to: **DISTRICT 10 EDUCATION FUND**

Mail Check and Registration Form to:

**United Steelworkers District 10
Health & Safety Training
1945 Lincoln Highway
North Versailles, PA 15137**

Registration forms should be received at the District 10 office by Friday, October 7, 2022.

THERE WILL BE NO REFUNDS AFTER THIS DATE



USW District 10 HEALTH AND SAFETY SURVEY

Please feel free to make additional copies if necessary and return the completed form with your registration form.

Your answers to this survey will be kept confidential. We are not asking for any personal information. We will not release the results of any individual survey – only results for the group as a whole.

PART I. BACKGROUND INFORMATION

We would like to start by asking a few questions about your background and experience.

1. What is your current job title?

JOB TITLE _____ INDUSTRY _____

How long have you worked that job? _____

2. Many of us have taken on new duties and we have seen our jobs change. Have you received enough training to handle the changes in your job?

_____ Yes _____ No

3. When a new or reassigned employee comes onto the same job you're doing, do you think they get enough initial training to do their jobs safely?

_____ Yes _____ No

4. Have you ever been assigned or asked to help new or newly assigned employees learn the safety aspects of a job?

_____ Yes _____ No

5. How often do you feel so rushed or pushed to perform all the duties of your job, that you feel it might cause you to do the work unsafely?

_____ Always _____ Usually _____ Sometimes _____ Rarely _____ Never

6. Do you feel the amount of overtime worked this plant affects safety?

_____ A lot _____ Some _____ A little _____ Not at all

7. Do you feel the level of overtime hours you personally work is affecting your safety on the job?

Always Usually Sometimes Rarely Never

8. How would you describe the safety of your current job compared to your safety five years ago? (check one.)

- My job has become much more safe
- My job has become somewhat more safe.
- My job is no more or less safe
- My job has become somewhat more dangerous
- My job has become much more dangerous
- I wasn't at the workplace five years ago

If your job has become more dangerous, please explain.

9. How often do you receive safety contacts from supervisors? (check one.)

Daily Weekly Monthly Yearly Never

10. Are regular safety meetings held in your area?

Yes No

If yes, how often are these area safety meetings held?

- More than once a month
- Once a month
- Every two or three months
- Two or three times a year
- Once a year
- Less than once a year
- Never

11. Have you been injured or made ill in the last two years?

Yes No

12. Did any of the following hazards lead to your most recent injury or illness described above? (Check any that apply.)

- improper lockout/tagout
- confined space
- mobile equipment

- lack of a guard on equipment
- in-plant railroad
- electrical hazard
- molten metal
- hot surfaces
- fall from height
- sharp edges
- faulty personal protective equipment (PPE)
- equipment failure, other than PPE
- chemical spill
- other (Please describe.) _____

13. Did any of the following factors contribute to the injury? (Check any that apply.)

- lack of training in job hazards
- lack of a specific written safety procedure
- understaffing; inadequate crew sizes
- fatigue
- lack of experience
- unsafe directive by supervisor
- other (Please describe.) _____

Did the factor get corrected?

Yes No

14. Have you ever read and do you have a copy of and understand the safety and health language in the USW's Collective Bargaining Agreement (Contract)?

Yes No

15. Have you ever requested relief from or refused to do a job/task that you thought was unsafe or unhealthy?

Yes No

16. Do you know the safety procedures (SJP's) on your job?

Yes No

17. Does management act quickly to address your health and safety concerns? (Check one.)

Always Usually Sometimes Rarely Never

Not applicable (don't have any health and safety concerns)