



ASA MIDWEST COUNCIL MEMBER 2023 SAFETY AWARD EVALUATION ENTRY FORM

COMPANY _____

CONTACT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

1. Entry Division (Total Hours Worked) I II III IV V VI

Div. I - Over 1,000,000 hours

Div. II - 500,000 to 1,000,000 hours

Div. III - 200,000 to 500,000 hours

Div. IV - 100,000 to 200,000 hours

Div. V - 50,000 to 100,000 hours

Div. VI - Less than 50,000 hours

2. Do you have a safety director? Yes No

If Yes -Name _____

Is this a full-time position? Yes No

3. Do you hold regular safety meetings? Yes No

If so, how often? Daily Weekly Monthly Other

What type? Tool Box Talks Pre-Task Planning

4. Do you have written personal protective equipment requirements? Yes No

5. Is safety used as criteria in performance reviews of supervisors? Yes No

Please answer the following questions per the below listed instructions. Information to answer questions 7, 8, 9 and 10 should be obtained from your first aid log and your firm's OSHA 300 Form and total work hours for your entire firm during the 2023 calendar year.

6. Did your firm experience a work-related fatality in 2023? Yes No

7. Total number of injuries in 2023 _____

8. Total number of recordable injuries in 2023 _____

9. Total number of lost work day cases in 2023 _____

10. Total number of lost work days in 2023 _____

11. Total number of man hours for 2023 _____

Signature: _____

Name: _____

Title: _____ NAICS Code _____

**MAKE SURE TO INCLUDE A COPY OF YOUR OSHA 300A FORM
WITH YOUR ENTRY BY MARCH 1, 2024**

EMAIL ENTRY TO: susan@asamidwest.com

| ASA Midwest Council Safety Committee |
P.O. Box 510743 | St. Louis, MO 63151