



Safety Issue Documentation Form

To be Completed by Union Members

Personal Information:

1. **Name:** _____
2. **Position/Job Title:** _____
3. **Station/Location:** _____
4. **Date of Incident:** _____

Safety Issue Details:

5. Nature of Safety Issue:

- Equipment Malfunction
- Hazardous Material Handling
- Emergency Evacuation Procedures
- Aircraft Maintenance Concerns
- Other (Specify): _____
- Ground Operations
- Weather-Related Safety
- Security Procedures
- Fatigue Management
- Communication Issues

6. **Description of the Incident:** (Please provide a detailed account of the safety issue, including the location, time, and any individuals involved.)

7. **Immediate Actions Taken:** (Describe any actions you took to address or mitigate the safety concern at the time of the incident.)



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8. **Witness Information:** (If applicable, provide details of any witnesses to the safety issue, including their names and contact information if available.)
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Communication and Reporting:

9. **Did you report the safety issue to a supervisor or manager?**

- Yes
- No

If yes, provide details of the report:

10. **Were any corrective actions taken by the company following your report?**

- Yes
 - No
 - If yes, please describe the actions taken:
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Follow-Up:

11. **Have you experienced this safety issue previously?**

- Yes
- No

If yes, provide details of any previous occurrences:



12. **Suggestions for Improvement:** (Offer any recommendations or suggestions for preventing similar safety issues in the future.)

Additional Information:

13. **Attach any supporting documentation or photos related to the safety issue.**

14. **Contact Information (Optional):** (Provide your contact information if you are willing to discuss the safety issue further.)

- **Email:** _____
- **Phone:** _____

15. **Declaration:** I, the undersigned, confirm that the information provided on this form is accurate to the best of my knowledge.

(Signature) (Date)

Please submit this form to the designated safety committee representative or union official for further action.