

SAFETY AWARD NOMINATION FORM

Employee Name: _____

Company: HGC SSRG Stanton

Nominated For: _____

Safety Employee of the Month: Awarded to an employee in a non-supervisory position.

Safety Field Leader of the Month: Awarded to an employee in a supervisory position. (Lead and above)

Safety Employee of the Year: Awarded to an employee that actively demonstrates a commitment to safety.

Nominated By: _____

During the past 12 months has the employee met all eligibility criteria? (To be completed by Safety Department)

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

Verified By: _____

Date: _____

Summary of Nomination

(Please describe in detail the employee's contributions to safety that merit nomination for recognition)

Nominator Signature: _____

Date Submitted: _____