



DIocese of ALEXANDRIA

Safety Meeting Report Form

Parish _____ Pg 1 of 2

1st Quarterly Safety Meeting

Date of Meeting: _____ Location: _____

Safety Issues or Concerns Discussed: _____

(Attach separate page of items discussed if necessary)

List of Attendees: _____

(Attach separate page of Attendees if necessary)

Safety Meeting Conducted and/or Documented By: _____

2nd Quarterly Safety Meeting

Date of Meeting: _____ Location: _____

Safety Issues or Concerns Discussed: _____

(Attach separate page of items discussed if necessary)

List of Attendees: _____

(Attach separate page of Attendees if necessary)

Safety Meeting Conducted and/or Documented By: _____

3rd Quarterly Safety Meeting

Date of Meeting: _____ Location: _____

Safety Issues or Concerns Discussed: _____

(Attach separate page of items discussed if necessary)

List of Attendees: _____

(Attach separate page of Attendees if necessary)

Safety Meeting Conducted and/or Documented By: _____

4th Quarterly Safety Meeting

Date of Meeting: _____ Location: _____

Safety Issues or Concerns Discussed: _____

(Attach separate page of items discussed if necessary)

List of Attendees: _____

(Attach separate page of Attendees if necessary)

Safety Meeting Conducted and/or Documented By: _____