

EMERGENCY ACTION PLAN

POLICY

As the One-Stop Operator for Area 17 Mahoning and Columbiana Counties, the Mahoning and Columbiana Training Association (MCTA) is responsible, under the Occupational Safety and Health Act, to provide a hazard-free work environment for co-located staff and is required to have a facility emergency plan under Ohio Administrative Code 1301: 7-7-04 Section 401.1. This Act is supplemented by Rule 9, Rules for Superintendence of Courts, Supreme Court of Ohio, and is exempt from disclosure in accordance with Ohio Revised Code section 149.433.3(b). The *Emergency Action Plan* will outline procedures and responsibilities to comply with specific building evacuation requirements and to maintain employee and public safety.

SCOPE

This *Emergency Action Plan (EAP)* applies to all co-located staff within the **OhioMeansJobs center Mahoning County**, located at 127 Boardman-Canfield Road, Boardman, Ohio 44512, and **OhioMeansJobs center Columbiana County**, located at 7989 Dickey Drive, Suite 4, Lisbon, Ohio 44432, (facility named Columbiana County Government Services Building). This *EAP* also applies to the Resource Rooms, meeting rooms, computer labs, staff offices, cubicles, and storage rooms throughout each location and covers all co-located staff and the public on these premises at the time of an emergency.

Examples of emergencies that employees may reasonably expect in the workplace are fire, bomb threat, toxic contamination, active shooter, and extreme weather situations.

Responsibilities are assigned to the Chief Operating Officer (COO), all Supervisors, and co-located staff. All co-located staff will be trained in the requirements of this *EAP*. This *EAP* will be reviewed annually and any resulting changes and responsibilities will be discussed with the Supervisors and co-located staff. A copy of the plan will be maintained in the COO's office and the OhioMeansJobs center Manager's office at each location. **An Emergency Evacuation Drill will be conducted at a minimum of at least once annually** in accordance with Ohio Administrative Code 1301:7-7-04 Section (E) 405.1.

PROCEDURES

RESPONSIBILITIES

The OhioMeansJobs center (OMJ) Manager (*Attachment A*) has primary responsibility for ensuring the physical elements of the *EAP* are current and in proper operational condition:

- Evacuation Route Plan design and sign postings
- Lit Exit signs and emergency lighting and Alarm system(s)
- Scheduling and conducting *EAP* drills

EMERGENCY ACTION PLAN

RESPONSIBILITIES *continued*

The OMJ center Manager:

- is responsible for the written plan and assignment of responsibilities.
 - Establishes and maintains procedures for co-located staff assignments.
- is the contact person for information or explanation of duties.
- is responsible for the semi-annual EAP staff training.
 - After each training, staff will sign a copy of the Training Roster at the end of this *EAP*. Signed Training Rosters will be kept in the OMJ center Manager's office and a copy will be sent to MCTA's HR Manager.

The OMJ center Manager or the appointed designee:

- has the responsibility to determine appropriate action when telephone bomb threats are received.
- is the **primary contact** for responding emergency services units.
- is responsible for giving the "**all clear**" signal when the building is safe to re-enter.

The OMJ center Manager and On-Site Supervisors have responsibility for:

- the safe evacuation of their employees and visitors.
- adequately training co-located staff on the requirements of the *EAP*.
 - Showing the location of Evacuation Route Plans Signs, Exit Doors, Fire Alarm Pull Stations, fire extinguishers, First Aid Kit, Tornado Shelter location, and Assembly Locations (*Attachment B*).
- choosing employees to participate in the operation of the *EAP* as *Safety Coordinators*. *Attachment C* lists the designated *Safety Coordinators*.
The staff chosen as *Safety Coordinators* has the responsibility to perform special duties during an evacuation as outlined in this *EAP*.

Co-located and Visiting partner staff have the responsibility to familiarize themselves with:

- Evacuation Procedures
- Exit Routes from the building
- Assembly Location
- Locations of Fire Alarm Pull Stations
- Locations of fire extinguishers

NOTE: Every day, each employee should make a cursory, security check of their work area to notice anything out of the ordinary, such as unusual objects or packages. If an unusual object or package is found, **DO NOT TOUCH IT!**

Some characteristics of suspicious packages and letters include the following;

- excessive postage
- oily stains
- handwritten or poorly typed addresses
- discolorations or odors
- incorrect titles, title (but no name)
- no return address
- misspellings of common words
- excessive weight
- lopsided or uneven envelopes
- protruding wires or aluminum foil

EMERGENCY ACTION PLAN

Some characteristics of suspicious packages and letters: continued

- visual distractions
- excessive masking tape or string
- markings such as "Personal" or "Confidential" or shows a city or state in the postmark that does not match the return address
- ticking sounds

For suspicious packages, have a co-worker notify a *Safety Coordinator* or Supervisor and call 9-1-1 immediately.

- Describe the object and location.
- **Leave the area.**

See Section 1. C. below for further instructions.

1. REPORTING EMERGENCIES

A. Reporting Non-Bomb Threat Emergencies

Any staff person that becomes aware of an emergency shall determine the type of emergency, medical, hostile, or weapons, and should notify the nearest co-worker, *Safety Coordinator*, or Supervisor of the nature of the emergency. **In the case of fire, activate the alarm system by pulling a Fire Alarm Pull Station (*Attachment B*).**

When an employee has reason to determine that there is imminent danger, either to themselves, customers, or coworkers, they are to notify a *Safety Coordinator* or Supervisor of the emergency. Anybody has the authority to call 9-1-1.

B. Reporting Bomb Threats received by telephone

Any staff member receiving a bomb threat by telephone will:

- remain calm and press the panic button (if available)
- keep the caller on the line as long as possible and write down every word the caller says. If possible, use the **Checklist for Telephone Bomb Threat (*Attachment D*)**, to gather information from the caller.

While one staff member is gathering information from the bomb threat caller, ***If possible at the same time,***

a co-worker should be alerted to attempt to start a telephone trace by dialing 9-1-1 and reporting that a bomb threat is in progress and request a trace.

- The 9-1-1 operator will contact the Sheriff's Office, and report the threat.
- The Sheriff's Office will investigate all threats and determine if evacuation is needed.
- Leave the area and wait for instructions from the Sheriff's office.
- When possible, alert a *Safety Coordinator* or Supervisor.

EMERGENCY ACTION PLAN

C. Reporting if a Bomb is Found

If a bomb (or suspicious object/package) is found, or delivered through the mail, do not touch it!

- **Notify a *Safety Coordinator* or Supervisor and call 9-1-1 immediately!**
 - Press the panic button (if available)
 - Describe the object and location.
 - The 9-1-1 operator will contact the Sheriff's office and report the finding.
 - The Sheriff's Office will investigate and determine if evacuation is needed.
- **Leave the area and wait for instructions from the Sheriff's office.**

2. ARMED INTRUDER / FACILITY LOCKDOWN

STOP!! Please read *Attachment E* "Active Shooter – How to Respond"

If a situation occurs where an individual enters an OhioMeansJobs center with a weapon, every precaution should be taken to preserve employee and visitors' safety.

- ***If safety permits***, immediately notify a co-worker, *Safety Coordinator*, or Supervisor.
- The building's Alert System (*Attachment B*) should be activated to alert the local police.
- Use the phone's intercom system to announce the nature of the emergency and location to other people in the building.
- Anyone who is able should call 9-1-1 to alert the police and report information.
Information to report includes, but is not limited to:
 - location of the perpetrator
 - perpetrator description and type of weapon if known
 - any injuries or fatalities
 - The 9-1-1 operator will contact the Sheriff's Office, and report the finding.
 - The Sheriff's Office will investigate and determine if evacuation is needed.
- Notify a co-worker to alert a *Safety Coordinator* or Supervisor in person or by phone to summon assistance to the area(s) in distress.
- Quickly communicate the disturbance to all staff and visitors within the OMJ center, so that if needed, **an evacuation can begin in the opposite direction of the incident.**

On-Site Supervisors should conduct accountability of all assigned employees and/or visitors as soon as the situation allows. Immediately notify the OMJ Manager of people unaccounted for.

EMERGENCY ACTION PLAN

3. ANTHRAX AND OTHER BIOLOGICAL AGENT THREATS

DO NOT PANIC

To cause infection, Anthrax organisms must be rubbed into chafed or scraped skin, swallowed, or inhaled. Disease can be prevented after exposure by early treatment with antibiotics. Anthrax is not spread by person-to-person contact.

Suspicious Unopened Letter or Package marked with threatening messages such as "Anthrax."

1. Do not shake or empty the contents of any suspicious envelope or package.
2. Place the envelope or package in a plastic bag or some other type of container to prevent leakage of contents.
3. If you do not have a container, then cover the envelope or package with anything (i.e., clothing, paper, trash can, etc.) and do not remove the cover.
4. Leave the room and close the door, or section off the area to prevent others from entering.
5. Thoroughly wash your hands with soap and water to prevent spreading any powder to your face.
6. Immediately notify a supervisor or *Safety Coordinator* and call 9-1-1.
7. List all persons who were in the room or area when the letter or package arrived or was recognized and give the list to the Sheriff's Office.

4. Tornadoes

Ohio's peak season for tornadoes generally runs from April through July.

- **TORNADO WATCH:** Tornadoes are possible in your area. Remain alert for approaching storms.
- **TORNADO WARNING:** A **tornado** has been **sighted** or indicated by weather radar. If a tornado warning is issued for your area and the sky becomes threatening, move to your pre-designated place of safety.
 - When a warning has been transmitted, employees should move themselves and visitors to the designated Tornado Shelter area. (*Attachment B*)
 - *Safety Coordinators* are responsible for closing all office doors within their perimeter
 - If unable to enter the Tornado Shelter area, move to an interior area away from glass and get under a sturdy piece of furniture.
 - Stay away from windows.
 - Assume a low crouched position under desk furniture if possible and cover your head using your arms and hands.

EMERGENCY ACTION PLAN

BUILDING EVACUATION

Evacuation Routes

Exit routes are designated with a lit sign above each door. Evacuation Route Signs are posted by exit route signs and stairways (if applicable). The maps contain the location of each fire alarm pull station and the evacuation routes. Employees must familiarize themselves with this information. (*Attachment B*) Evacuation routes must be maintained and be clear of obstructions and arranged or marked so that the way to a safe place outside the building is unmistakable.

Evacuation Procedure

Safety Coordinators and Supervisors will be responsible for the evacuation of staff and visitors. The Supervisor may act in this capacity or appoint a *Safety Coordinator* who will be responsible for their section of the building. The names of the *Safety Coordinators* will be provided to the OMJ center Managers. The OMJ center Managers will indicate the staff appointed as *Safety Coordinators* on the internal phone extension list. (*Attachment C*)

Safety Coordinators will be identified by an Orange Vest.

The building alarm system will warn of an emergency and is available throughout the workplace. (*Attachment B*) The alarm system may be an alarm bell/buzzer or a combination of alarm bell/buzzer and voice communication.

When the alarm is heard, all employees will immediately prepare to evacuate.

- Work areas should be secured (locked)
- If practicable, equipment should be turned off.
- Windows and doors should be closed when exiting rooms.

Staff and visitors will proceed with evacuation in an orderly manner according to the defined evacuation routes. (*Attachment B*)

- **Stairways** will be the escape routes. If the primary evacuation route is blocked, the secondary route will be used. (*Attachment B*)
 - **Elevators will not be used** for evacuation at the Columbiana County OMJ center.

EMERGENCY ACTION PLAN

- Employees will not carry wheelchair users up or down stairways. *Safety Coordinators* will:
 - move wheelchair users and other disabled persons to an area designated for rescue to wait for assistance. *Safety Coordinators* will assign a staff person to stay with the person until an Emergency Services Unit arrives.
 - *Safety Coordinators* will call 9-1-1 and report the situation. A 9-1-1 operator will alert the responding Emergency Services Unit of the location of the person(s) to be removed.

The *Safety Coordinators* will:

- assure that all employees and visitors have left the building.
- check that windows and doors are closed in their section.
- verify the restrooms located in their sections are vacant.
- verify doors that exit their areas are closed.
- place an “**Emergency Evacuation in Progress - Do Not Enter**” sign outside the entrance door(s). (*Attachment F*)

Assembly Location (*Attachment B*)

Each OMJ center will designate an assigned Assembly Location (*Attachment B*), outside of the building where employees and visitors will report for accountability purposes. Staff will assist visitors to the designated gathering area and check in with their Supervisor. **Safety Coordinators will retain an up-to-date listing of employees in their areas.** They will assure all employees are present or accounted for by taking a final roll call at the Assembly Location. Supervisors and *Safety Coordinators* will immediately notify the OMJ Manager of any missing or unaccounted employees or visitors.

No one will return to the building until an “**all clear**” signal has been given by the OMJ Manager or designee.

Rescue and Medical Duties

First Aid Kits and medical supplies are appropriately stocked and readily available. (*Attachment B*)

If an employee or visitor requires medical attention for an illness or injury:

- Not life-threatening -- If conscious, ask for emergency contact information and make the call.
-- If unconscious, call 911.
- If life-threatening, call 911.

Complete an **Incident Report** (*Attachment G*) and submit it to the OMJ Manager. **Employees are not permitted to drive ill/injured co-workers or visitors home or to a medical facility.**

EMERGENCY ACTION PLAN

ATTACHMENTS

- Attachment A:* Names and contact information of OMJ center Managers
- Attachment B:* Evacuation Route Plans -- Location of Alarms, Fire Extinguishers, Tornado Shelters, and First Aid Kits
Assembly Location(s)
- Attachment C:* OMJ center Phone Directories
- Attachment D:* Checklist for Telephone Bomb Threat
- Attachment E:* Active Shooter – How to respond
- Attachment F:* “Emergency Evacuation in Progress – Do Not Enter” Sign
- Attachment G:* MCTA OMJ centers Incident Report

Names and contact information of OMJ center Managers

OhioMeansJobs center [Columbiana County](#)

Jack Hile, OhioMeansJobs center Manager

330-420-9675 Ext. 8104

jack@onestopohio.org

OhioMeansJobs center Mahoning County

Carol Ramsay-Loomis, OhioMeansJobs center Manager

330-965-1787 Ext. 7117

carol@onestopohio.org

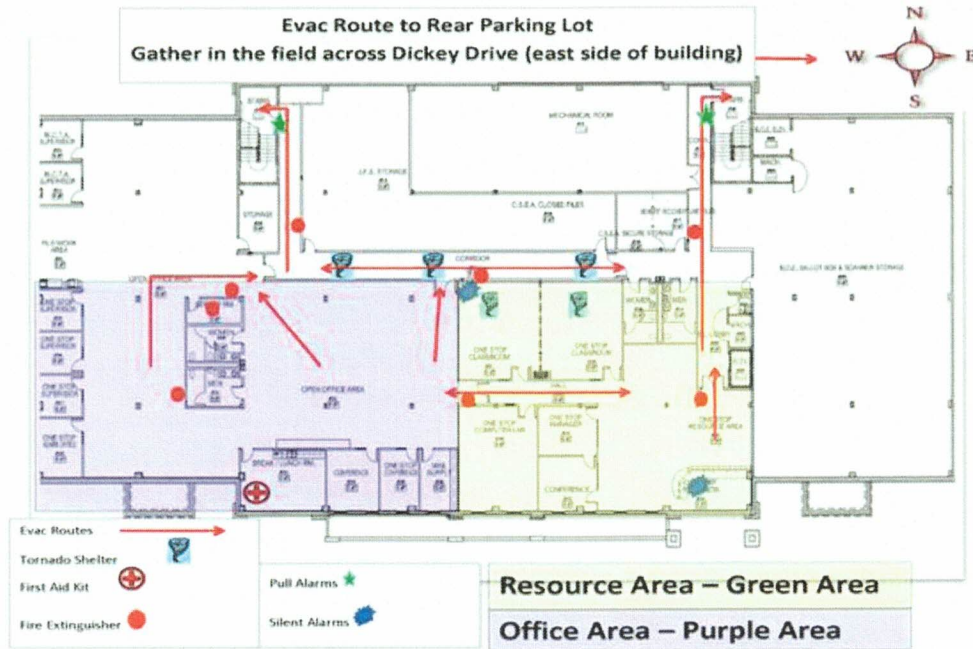
Columbiana County OMJ center

Evacuation Route Plan & Assembly Location

Attachment B

OhioMeansJobs Columbiana County

Evacuation Route, Location of Alarms, Fire Extinguishers, Tornado Shelters and First Aid Kit

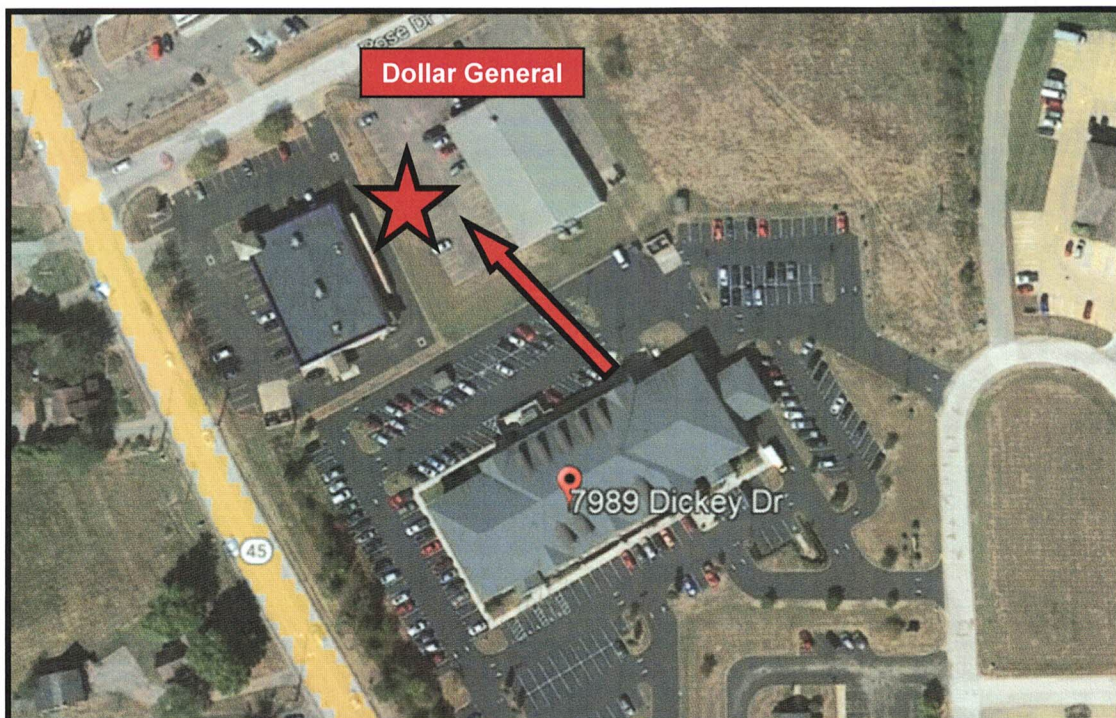


OhioMeansJobs Columbiana County

Assembly Location



Assembly Location: Front of Dollar General

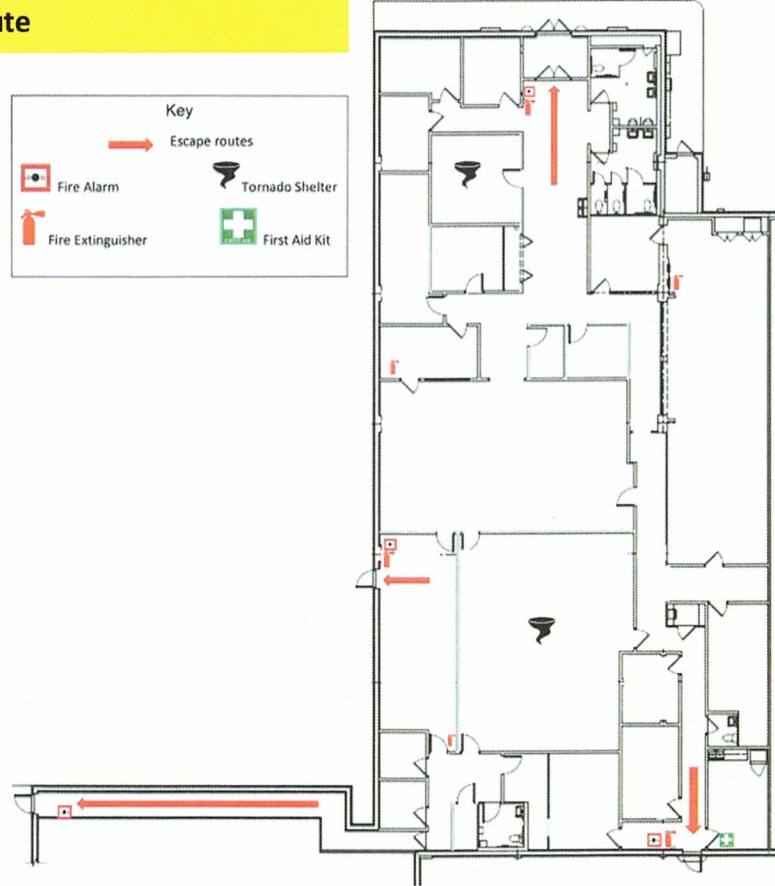


Mahoning County OMJ center

Evacuation Route Plan & Assembly Location

Attachment B

OhioMeansJobs Mahoning County Evacuation Route



OhioMeansJobs Mahoning County Assembly Location

★ Assembly Location: Front of Aaron's Furniture Store on Route 224



Columbiana County OMJ center

Phone Directory

Attachment C



Columbiana County

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Supervisors

Safety Coordinators

Staff	Agency	Ext #
Aughinbaugh, Linda	MCTA	8119
Bratt, Susan	MCTA	8203
Customer Work Cubicle		8201
Customer Work Cubicle		8107
Open	CCCTC	8111
Dunmire, Denise	MCTA	8126
Engle, Amy	MCTA	8208
Exline, LaRae	MCTA	8136
Grier, Cynthia	MCTA	8212
Hildreth, Lindsay	ODJFS	8130
Hile, Jack	MCTA	8104
Holshue, Karen	ASPIRE	8102
Karnosh, Shaunna	MCTA	8209
Lyons, Steve	MCTA	8206
Mango-Wilson, Christine	OOD	8120
Marshall, Michele	MCTA	8205
Mathews, Gloria	MCTA	8125
McLaughlin, Christopher	MCTA	8124
Mondak, Steve	MCTA	8211
Oesch, Dave	ODJFS/Vet	8100
Open	ODJFS/Vet	8118
Open	ODJFS	8119
Open	CCDJFS	8105
Open		8112
Parks, Caitlin	MCTA Intern	8109
Rosko, Michelle	MCTA	8128
Samargia-Pflug, Leigh	MCTA	8106
Sullivan, Brianna	MCTA	8207
Strank, Jennifer	OOD	8101
Tkachuk, Janice	MCTA	8127
Triplett, Linda	MCTA	8131
UI Phone		8110
Vollberg, Angela	MCTA	8202

Unemployment

Phone: 1-877-644-6562

Online: <http://unemployment.ohio.gov>

7989 Dickey Drive

Suite 4

Lisbon, Ohio 44432

Phone: (330) 420-9675

Fax: (330) 424-7313

TTY: (330) 420-9578

Website: OhioMeansJobs.com/Columbiana

Ohio Relay Service: 7-1-1

Video Phone: 330-964-0623

Rooms

Computer Lab	8103
Conf Rm 3	8149
Mail/Supply Rm	8108
MCTA Work Area	8210
Multi-purpose rm A	8117
Multi-purpose rm B	8123

OhioMeansJobs Columbiana County Partners

Col Cty Board of DD	330-424-0404
Col Cty Career & Tech Center	330-424-9561
Col Cty Econ Devel Committee	330-424-9078
Col Cty Educational Service Center	330-424-9591
Col Cty Dept of Job & Family Services	330-424-1471
Col Cty Metro Housing Authority	330-386-5970
Col Cty Port Authority	330-386-9051
Community Action Agency	330-424-7221
Eastern Ohio Correctional Center	740-765-4324
Eastern Gateway Community College	740-264-5591
Mah & Col Training Association	330-747-5639
Oh Dept of Job & Family Services	
Opport for Ohioans with Disabilities	800-686-5145
The Counseling Center	330-424-9573

Emergency Phone Numbers - 911

Police

Lisbon PD	(330) 424-7810
Sheriff Dept	(330) 424-7255

Fire

Lisbon FD	(330) 424-3511
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Ambulance

EMT Ambulance	(330)424-7474
KLG	(330)420-0911

All Page Over Phone System - 703

Do-Not-Disturb Code: On - 370, Off - 371

Mahoning County OMJ center

Phone Directory

Attachment C

Safety Coordinators are highlighted in yellow

Supervisors are highlighted in blue

ODJFS Staff

Dustin Bridgeman	DVOP	7131
Kristen Womeldorff	Workforce Spec.	7144
Margaret Savko	Employment Prof.	7113
Stacey Lozano		7111
Tiffany Woods	Employment Prof.	7112
Open Desk		7150

Business Services Staff

Carla Colonello	Bus. Service Rep.	7139
Mary Ann Shepherd	BRN Account Rep.	7119

Programmatic Staff

David Gordon	Career Consultant	7153
Laura Gatrell	Adult Coordinator	7115
Rachael Brantley	Career Consultant	7152
Sarah Block	Career Consultant	7151
Traci King	MIS Intake Spec.	7136
Open Desk	MIS Office	7116
Intake Schedule	Reschedule, Cancel	6111

One-Stop Staff

JoAnn Schuler	Facilitator	7118
Robert Myers	Facilitator/ RESEA	7135
Wanda Trevathan-Cooper	Facilitator	7141
Arelis Laviena	Facilitator	7148
Melissa Alfano	Facilitator	7146

Onsite Partner Staff

	Job Corps	7138
Open Desk		7142
Open Desk		7124

PHONE: 330-965-1787

To Page All: Page, 0

Management Staff

Carol Ramsay-Loomis	One-Stop Mgr.	7117
Cell Phone	330-360-4460	
Cynthia Bresnahan	Bus. Serv. Mgr.	7140
Cell Phone	330-540-6811	
Lindsay Hildreth	Program Del. Sup.	8130
Cell Phone	330-206-9858	
Susie Kooser	COO	7128
	MCTA Office	6128
Cell Phone	330-885-4201	

Other Rooms

Conference Room 1	Lg. Conf. Room	7120
Conference Room 2	Bus. Conf. Room	7149
Conference Room 3	Sm. Conf. Room	7123
Kitchen		7137
Phone Room		7145
Workshop Room		N/A

Other Number of Importance

MCTA Downtown	330-747-5639
OMJ Columbiana County	330-420-9675
Mahoning County JFS	330-740-2600
Dept. of Labor	1-866-487-9243
OWD Info Line	1-888-296-7451
Police non-emergency	330-726-4144
Fire non-emergency	330-726-4155
	<i>March 2022</i>

OMJ centers
EMERGENCY ACTION PLAN

Attachment D

CHECKLIST FOR TELEPHONE BOMB THREAT

EXACT TIME & DATE OF CALL: _____

EXACT WORDS OF CALLER: _____

IF NECESSARY, ASK CALLER TO REPEAT MESSAGE AND WRITE AS MUCH DOWN AS POSSIBLE.

KEEP CALM

KEEP TALKING

DON'T HANG UP

SIGNAL A CO-WORKER TO GET ON THE EXTENSION

SIGNAL A CO-WORKER TO CALL 911 AND THE SECURITY GUARD DESK

ASK WHEN AND WHERE THE BOMB IS GOING TO EXPLODE? _____

ASK WHAT THE BOMB LOOKS LIKE? _____

ASK WHAT TYPE OF A BOMB IS IT? _____

ASK WHAT WILL CAUSE IT TO DETONATE? _____

ASK "WHY ARE YOU DOING THIS?" _____

CHECKLIST FOR TELEPHONE BOMB THREAT

TRY TO GET CALLER'S FULL NAME: _____

TRY TO GET CALLERS EXACT LOCATION AND PHONE NUMBER: _____

LISTEN CAREFULLY TO THE VOICE:

CIRCLE ONE: **MAN** **WOMAN**

ACCENT? _____

CIRCLE ANY OF THE FOLLOWING:

Calm	Slow	Nasal	Angry	Broke
Stutter	Disguised	Lisp	Sincere	Rapid
Giggler	Deep	Crying	Squeaky	Excited
Stressed	Accent	Loud	Slurred	Normal

ACTIVE SHOOTER – HOW TO RESPOND

★ **YOU WILL BE AFRAID. CALM YOURSELF AS QUICKLY AS POSSIBLE.** ★

Quickly determine your best ESCAPE ROUTE:

Evacuate yourself whether others follow or not

Prevent others from entering the area where the active shooter is located

Help others escape, if possible

Call 911 when you are safe

If you cannot escape, HIDE:

Out of the shooter's view

NOT in a trapped environment

Keep options open for movement

Provide protection if shots are fired toward you

If your life is in imminent danger, TAKE ACTION:

Be aggressive against the attacker

Throw items or improvise a weapon

Yell

Call 911 and alert the police – keep the line open

When the police arrive:

Follow the Officers' instructions

Put down any items you may have in your hands

Keep hands visible, raise them, spread your fingers

Do not make quick movements toward the officer

Do not point, scream, or yell

Do not stop the officer to ask for help

**EMERGENCY
EVACUATION
IN
PROGRESS**

DO NOT ENTER

INCIDENT REPORT

An incident is an event that caused INJURY to an employee or customer, and/or DAMAGE to equipment, building, or materials.

Person completing this form:			
Date form was completed:			
Date of incident:		Time of Incident:	
If an employee was involved in the incident, give name and job title below:			
If a customer was involved in the incident, give name and phone number below:			
Witness(es): Name & Phone			
Type of incident, choose one or both: Injury to a person? Damage to equipment, building, or materials?			
Department and location where the incident occurred:			
Complete only if an INJURY occurred:			
Name of injured person:			
Nature of the injury: (strain, cut, bruise, etc.):			
Body part(s) affected:			

OMJ centers

EMERGENCY ACTION PLAN

Attachment G continued

INCIDENT REPORT continued

Complete only if an **INJURY** occurred:

Medical treatment required? ☐ Yes ☐ No

If yes, what type? ☐ First-aid on-site? ☐ Express care?

☐ EMT? ☐ Doctor? ☐ Hospital?

Name of the EMT company, facility, hospital, or physician:

Was the injured person hospitalized overnight as a patient? ☐ Yes ☐ No

Complete if an **employee** was **injured**:

Did the employee leave work early due to the injury? ☐ Yes ☐ No

If yes, what time?

If applicable, date the employee returned to regular duty:

If applicable, date the employee returned with light-duty restrictions:

Complete if **DAMAGE** to equipment, building, or materials occurred:

List all equipment, materials, and/or building damage:

OMJ centers

EMERGENCY ACTION PLAN

Attachment G continued

INCIDENT REPORT continued

Identify the factors that you believe contributed to or caused the incident:

Were proper procedures being followed when the incident occurred? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If no, explain in detail:	

Are changes in equipment or procedures necessary to prevent reoccurrence?	
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in detail:	

INCIDENT REPORT *continued*

If the incident involved an **employee**, please have the employee and supervisor sign below.

Employee signature: _____ Date: _____

Supervisor signature: _____ Date: _____

Forward this form to the HR Department as soon as possible following the incident.

Note: If an employee receives medical treatment, additional forms may need to be completed and forwarded to the HR Department so a Workers' Compensation claim can be filed.

EMERGENCY ACTION PLAN

NEW EMPLOYEE TRAINING ACKNOWLEDGEMENT FORM

I have read and understood the EMERGENCY ACTION PLAN.

Printed Name: _____

Signature: _____

Date: _____

Submit signed form to HR Manager