EMPLOYEE ACKNOWLEDGMENT FORM

CODE OF SAFE PRACTICES

I ___________________________________________ (print), hereby acknowledge that I have received, read, and understand the "Code of Safe Practices" for ASSOCIATED STUDENTS OF SDSU.

I agree to conform to all Company practices, rules, and regulations relating to safe work performance.

I understand that my failure to follow these safety procedures will result in disciplinary action up to and including discharge.

I further understand that:

a. It is my responsibility to report all unsafe conditions or violations of the Code of Safe Practices to my supervisor or other management personnel in order to minimize the potential of injury to my fellow workers.

b. I am encouraged to inform my immediate supervisor of any hazards at the worksite without fear of reprisal, and that should my assistance create any such action or related intimidation, that I am encouraged to contact his/her supervisor or Safety Coordinator.

_________________________________________  ___________________________
(Signature of Employee)                     Date

_________________________________________  ___________________________
(Signature of Supervisor)                    Date

COPIES TO: PERSONNEL FILE & EMPLOYEE
ASSOCIATED STUDENTS OF SDSU
CODE OF SAFE PRACTICES

The purpose of the Code of Safe Practices is to assist you in making safety a regular part of your work habits. This is a minimum guide to help identify your responsibility for safety. **Your supervisor is obligated to hold you responsible for your safety** by enforcing these rules and by providing you a safe place to work. Additionally, each A.S. department has a specific Code of Safe Practices detailing safety protocols for that facility.

a. I will immediately report to my supervisor all accidents or near misses, and injuries, no matter how slight, that occur on the job.

b. I will cooperate with and assist in the investigation of accidents to identify the causes and to prevent recurrence.

c. I will promptly report to my supervisor all unsafe acts, practices or conditions that I observe.

d. I will become familiar with and observe safe work procedures during the course of my work activities.

e. I will keep my work areas clean and orderly at all times.

f. I will avoid engaging in any horseplay and avoid distracting others.

g. I will obey all safety rules and follow published work instructions.

h. I will wear personal protective equipment when working in hazardous areas, and/or as required by my supervisor.

i. I will inspect all equipment prior to use and report any unsafe conditions to my immediate supervisor.

j. I will submit any suggestions for accident prevention which may assist in improved working conditions or work practices to my immediate superior.

k. I will smoke in authorized locations only.

l. I will not bring onto the job, have in my possession or in my car, any weapons or ammunition of any kind.

m. I will not have in my possession, use, or introduce any kind of intoxicating liquor or illegal drugs on any Associated Students' property or work area or facility, or I will accept possible discharge for these illegal actions.

n. I will not come to work under the influence of intoxicating liquor or illegal drugs, and realize that I will not be allowed to start work and may be immediately discharged for this action.

**I HAVE READ AND UNDERSTAND THE ABOVE ITEMS AND REALIZE THAT FAILURE TO FOLLOW THESE RULES MAY BE GROUNDS FOR DISMISSAL.**