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| **EMPLOYEE ACKNOWLEDGMENT*****General Safety Guidelines for Company*** |
| ***Company:***  |
| ***Show Name:***  |
| **(Give to Company Office Coordinator upon completion)** |

I understand and acknowledge:

* Governmental Laws, and the Company’s Safety Manual, outline additional safety responsibilities for Heads of Department/Supervisors. If I am a Head of Department or Supervisor, I accept these responsibilities.
* As an employee of the Company, I have received, read, understood, and will abide by the *General Safety Guidelines for Company* and the *COVID-19 Protocols (*collectively *“Guidelines”)*. I have been informed that failure to adhere to these Guidelines may result in disciplinary action including and up to dismissal. In addition to the Guidelines, the Company has an Injury & Illness Prevention Program (IIPP). It is contained in the ***Company Safety Manual*** and is available for review in the Company Office, Construction Office, on-set with the 1st AD, or online at [hsseworld.com.](https://hsseworld.com)
* I will see my supervisor or call the Anonymous Safety Hotline at (**insert your hotline** (toll-free worldwide) if I have questions, safety concerns or need training.
* If I am injured or feel ill for any reason, I will notify my supervisor and/or First Aid immediately.
* Personal Protective Equipment (PPE): I will wear appropriate clothing and work shoes, and PPE that is recommended by my supervisor, by the Company Safety Representative, the COVID-19 Lead, or the COVID-19 Protocols. If I have any COVID-19 related concerns or questions, I understand that I can raise them with the COVID-19 Lead, my supervisor, the Company Safety Representative, or report them to the Anonymous Safety Hotline.
* This Company has a strict fall protection policy. I will always wear a full-body harness with a lanyard attached to an appropriate anchor point whenever I am in an aerial boom lift, a scissor lift, a man lift, or working near the edge of any elevated work surface. *(See attached General Safety Guidelines for Company for trigger heights.)*
* This Company has a strict table saw use policy. I will always use the saw guard, unless making certain cuts as authorized by my supervisor. While operating the saw, I will not wear gloves, long hair, jewelry, scarves, or other items that can be become entangled.
* I will not knowingly operate any machinery that is not in good working order. Any deficiencies I notice will be tagged and brought to the attention of my supervisor.
* I will not perform any potentially hazardous activity that I have not been trained to do.
* I can request a copy of a Safety Data Sheet (SDS) for any product by calling the 3E Company at (insert number, an SDS management company for this Company.
* The *General Safety Guidelines for Company* offer general safety advice for situations that typically arise during construction or Production. More detailed safety information is available in the IIPP/ Safety Manual, from my supervisor, at www.hsseworld.com and/or from the Company Safety Representative. The IIPP guidelines include:
	+ Aerial lifts – including condors, scissor lifts, man lifts.
	+ Working from Heights – including ladders, soundstage permanents, rooftops and scaffolding.
	+ AMPTP Safety Bulletins.
	+ Codes of Safe Practices.
	+ Tool box Talks.
	+ Safety Data Sheets (SDS).
* I must attend safety meetings as instructed by my supervisor or whenever they are appropriate for my work.
* Working under the influence of alcohol, or any drug that would impair my ability to work safely, is prohibited.
* Guns are prohibited in the workplace.

**IMPORTANT!**

***By signing this form you do not waive any of your rights under Workers’ Compensation laws.***

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| **Employee Name** (print)**:**  | **Employee Signature:**  |
| **Job Title/Position:**  | **Department:**  |
| **Date:**  |  |

*(Form 1) General Safety Guidelines for Company Acknowledgment Form –* [*hsseworld.com*](https://hsseworld.com)