

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.
- 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 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.

Employee Name (print): _____

Employee Signature: _____

Job Title/Position: _____

Department: _____

Date: _____