

**SUNY Plattsburgh – Environmental Health and Safety
Employee Safety Concern Sheet**

Contact Information (Optional)
Name_____ Title_____
Department_____
Phone_____ Email_____

Date_____ Time_____

Specific
Concern_____

Suggestions_____

May we contact you? _____YES _____NO

Please return this completed form to the Environmental Health and Safety Department located in Beaumont Hall Room 115.
