AWARD

TIMELINE

Application
Available Online
January 1, 2020

Application
Deadlines

Phase I:
Statistical Data
February 4, 2020

Finalists Notified
February 10, 2020

Phase II:
Subjective Report
March 2, 2020

Winners Notified
March 27, 2020

Awards Presented
April 21-22, 2020

Awards presented
during the 78th
Wisconsin Safety
Council Annual
Conference in
Wisconsin Dells

Apply Online: www.wisafetycouncil.org

26th Annual
WISCONSIN
CORPORATE SAFETY Awards

2019 AWARDS PROGRAM

WHY APPLY?

• Winning a corporate safety award is an excellent recognition tool and provides opportunities for new business thanks to the prestige and exposure of the award.

• This program gives much deserved recognition to your employees for their loyalty, hard work and dedication.

• Leading companies like yours deserve the opportunity to be recognized as a leader in workplace safety efforts.

• Exclusivity – winning this award places you in an elite group of fewer than 200 Wisconsin companies who have won in the 25 years this program has been honoring deserving organizations.

• Nominees and winners alike have received substantial and deserved recognition in the media locally, statewide and beyond.

• This awards program highlights significant accomplishments and industry firsts of those companies leading the way for future generations.

• The application process allows you to fully assess your organization – a valuable tool because it helps you evaluate your safety program’s strengths and improve upon weaknesses.

Now easier than ever, the streamlined CSA application process can be fully completed online at www.wisafetycouncil.org. Each CSA application includes:

• Phase I: Quantitative data relating to your company’s incidence rates for the past three years straight from your OSHA 300 logs

• Phase II: Qualitative data given to the qualified finalists to tell your company’s safety narrative

Questions? Contact Barb Deans, WSC, 608.258.3400

CELEBRATING SAFETY IN WISCONSIN!
PHASE I — STATISTICAL DATA FORM

The information will only be used by the Wisconsin Safety Council and judges of the 2019 Wisconsin Corporate Safety Awards.

<table>
<thead>
<tr>
<th>Question</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Worker fatalities in 2019 (see eligibility section)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2. Average number of temporary/contract employees in 2019</td>
<td></td>
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<tr>
<td>2a. Number of temporary/contract employee hours worked</td>
<td></td>
<td></td>
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<tr>
<td>2b. Number of temporary/contract employee recordable cases</td>
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<tr>
<td>3. Average number of employees on payroll</td>
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<tr>
<td>4. Total number of hours worked</td>
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<tr>
<td>(Work Hours (WH) are the number of paid work hours for the calendar year (including office hours). PLEASE NOTE: WH are the actual payroll hours worked, excluding vacation and holidays. You must include all full-time, part-time, seasonal and temporary/contract employees that work under your organization's supervision.)</td>
<td></td>
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<tr>
<td>5. Total number of recordable cases (from OSHA form 300)</td>
<td></td>
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</tr>
<tr>
<td>5a. Column H (days away from work)</td>
<td></td>
<td></td>
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<tr>
<td>5b. Column I (job transfer or restriction)</td>
<td></td>
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<tr>
<td>5c. Column J (other recordable cases)</td>
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<tr>
<td>5d. Total Column (H, I and J)</td>
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<tr>
<td>6. If your answer to question #5a is zero, how far back does this record go?</td>
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<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Hours worked</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

INCIDENCE RATE: Enter Line 5d (above) x 200,000 = Rate
(RECORDABLE) Enter Line 4
INCIDENCE RATE: Enter Line 5a (above) x 200,000 = Rate
(LOST WORKDAY CASE) Enter Line 4

7. Severe Injury Reporting
   7a. Total number of worker amputations                                  |
   7b. Total number of worker loss of eye injuries                        |
   7c. Total number of worker in-patient hospitalization                  |
   7d. Has OSHA conducted a safety & health inspection at your location(s)? | [yes or no] |

I hereby certify that the information included in this application form is factual and accurate.

Completed by: (Please print or type name and title)

APPLICATION MUST BE RECEIVED BY NOON ON TUESDAY, FEBRUARY 4, 2020