

## **The Governor's Safety Achievement Award Instructions**

The Governor's Safety Achievement Award recognizes Montana's small, medium and large employers in the public and private sectors that are committed to safety in the workplace. Through their commitment to safety, these employers are not only creating a safe place to work; they are reducing their workers' comp rate making them leaders in their industry.

### **The Criteria:**

Governor's Safety Achievement Award recipients must meet the following criteria:

- Compliance with the Montana Safety Culture Act
  - Provide documentation of the following:
    - Employee safety orientation
    - Task specific training
    - Regular refresher training
    - Safety awareness program
    - Periodic self-inspection
    - Safety committee
    - Accident or incident investigations
- Have a good safety record
  - Better than average Emod and/or Incident rate for the last 3 years
  - Documentation must be submitted with nomination form.

### **Completing the Form**

- Nominations for the Governor's Safety Achievement Award must be submitted electronically using this nomination form. Please include a brief summary (250 words or less) as to why the nominee deserves the award.
- You must include additional pages of supporting documents showing compliance with the Montana Safety Culture Act.
- The information submitted should support the award criteria for safety in the workplace.

### **The Process**

A selection committee will review all nomination forms and select the Governor's Safety Achievement Award recipient(s). A letter will be sent to all nominees after the recipients have been selected. The recipients will be announced at the Governor's Workers' Compensation Conference in West Yellowstone on October 5, 2017.

**E-Mail Completed forms to:**

Casey Kyler-West at [ckylwest@mt.gov](mailto:ckylwest@mt.gov)

**Name of the Company:** \_\_\_\_\_

**Type of Industry:** \_\_\_\_\_ **Number of Employees:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Business Phone:** ( ) \_\_\_\_\_ **Business Fax:** ( ) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

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**Your Name:** \_\_\_\_\_

**Title or Position:** \_\_\_\_\_

**Agency/Company/Organization:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_ **email:** \_\_\_\_\_

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**Deadline:** All nomination forms and supporting documentation must be **received electronically** no later than **Monday July 31, 2017**.

**Nomination Description:**

Please use this space to describe why your nominee deserves a 2016 Governor's Safety Achievement Award. If preferred, you may attach the description to this form.

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