



COMPREHENSIVE EMPLOYMENT SOLUTION

Safety Meeting Attendance Form

Company Name: _____

Location Address: _____

Date of Meeting: _____ **Safety Officer Conducting Meeting:** _____

Safety Topic(s): 1) _____ 2) _____

3) _____ 4) _____

Additional Topics/Notes: _____

Employee Name

Signature

Please file the completed attendance form with your company records and either fax a copy to (707) 723-0389 or email a copy to safety@trustces.com as a back up to your company's records.