CalCom
HR/Safety Committee

2019 Safety Awards Program

Return to CalCom
No later than September 18, 2019

THINK SAFETY
it couldn’t hurt
FLEET SAFETY CONTEST

The Fleet Safety Contest recognizes fleet operators with outstanding safety records. Any CalCom Member Company is eligible.

Winners' plaques will be presented at the CalCom Annual Conference Awards Ceremony.

AWARDS CRITERIA

♦ For Fleet Safety Contest purposes, a vehicle accident is an occurrence in which bodily injury or property damage is incurred.

• Where actual mileage figures are unavailable, estimate mileage by fuel consumption.

• Awards are based on the ratio (incident rate) of vehicle accidents to total miles traveled during 2018.

  (Frequency rate = one million x the number of vehicle accidents, divided by the number of miles driven)

• Based on data from December 01, 2017 through November 30, 2018.

Board of Directors Award - Best accident record in category.
ENTRY DEADLINE: September 18, 2019

Print or Type:

Name: ________________________________________________________________

Title: _________________________________________________________________

Company: _____________________________________________________________________

Address: ____________________________________________________________________

City: __________________________ State: _______ Zip: _________________________

Phone: __________________________ Fax: ___________________________________

ACCIDENT RECORD

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>No. of Vehicle Accidents</th>
<th>Total Miles Driven</th>
<th>Incident Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2018</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Return to: **CalCom**
601 University Avenue, Suite 177
Sacramento, CA 95825
Fax: 916.922.3648 / Email: mariann@calcomassn.org
The Occupational Safety Contest recognizes CalCom Member Companies with outstanding industrial safety records. Any Member Company is eligible. Winners' plaques will be presented at the CalCom Annual Conference Awards Ceremony.

**AWARD CRITERIA**

- Cal/OSHA Form 300 or equivalent (Record keeping and Reporting Guidelines for Public and Private Employers under the California Occupational Safety and Health Act of 1973) is used for recording injury accidents and illness.

  The total of column H from Form 300 will provide desired occupational injury and illness (lost workdays) accident information.

  Guidelines are available from the National Safety Council.

- Awards are based on the incident ratio (frequency) of work-related injuries to total hours worked during 2018.

- Incident rate = 200,000 x the number of work-related injuries (lost workdays), divided by the total number of person hours worked.

- An Occupational Injury is any injury, which results from a work accident or exposure involving a single incident in the work environment.

- An Occupational Illness is any abnormal condition or disorder caused by exposure to environmental factors associated with employment.

- Based on data from December 01, 2017 through November 30, 2018.

**President's Award - Best accident record in size category**
ENTRY DEADLINE: September 18, 2019

**Print or Type:**

Name: ________________________________________________________

Title: __________________________________________________________

Company: ______________________________________________________

Address: _______________________________________________________

City: _______________________________ State: _______________ Zip: __________

Phone: ______________________________ Fax: _______________________

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>No. of Work-Related Injuries (lost workday) accidents</th>
<th>Total Hours Worked (if available)</th>
<th>Incident Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2018</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of occupational injuries to be taken from Cal/OSHA Form 300. Total of column H.

**Return to:**  **CalCom**  
601 University Avenue, Suite 177  
Sacramento, CA  95825  
Fax: 916.922.3648 / Email: mariann@calcomassn.org
To nominate someone who has an outstanding driving record, simply fill out this form. Our team of judges may select your employee to receive this prestigious award.

The individual award will be $1000 CASH and a plaque, which will be presented at the CalCom Annual Conference Awards Ceremony.

Based on data from December 1, 2017 through November 30, 2018

**DRIVER-OF-THE-YEAR SELECTION CRITERIA**

→ A. Total years driving.

→ B. No accidents or violations on DMV record.

→ C. Acts of courtesy; acts of service, and contributions to highway safety.

**TOTAL YEARS AS FULL-TIME DRIVER**

(Full time driver means driving is an essential function of the individual's position)

- Total years as full-time Driver as part of job: ______________________

*Use reverse side of this form to describe nominee in accordance with Part C of Selection Criteria above.*

*Also be sure to complete all identification information on the reverse!*
CalCom Driver-of-the-Year

Entry Deadline: September 18, 2019

Type or print the following information:

>> Nominee's full legal name: ________________________________________________

Driver's License Number: ________________________________________________

Company: ________________________________________________

Mailing Address: ________________________________________________

Phone: _____________________________ Fax: _____________________________

>> Supervisor's name: ________________________________________________

Phone: _____________________________ Fax: _____________________________

>> Person submitting entry: ________________________________________________

Company and Address: ________________________________________________

Phone: _____________________________ Fax: _____________________________

Please describe your nominee's driving record (type vehicle) and work record. If appropriate, include any contributions to highway safety (i.e. acts of courtesy, acts of service, etc.)

>>> Use additional pages as needed.

Return to:

CalCom
601 University Avenue, Suite 177
Sacramento, CA  95825
Fax: 916.922.3648 / Email: mariann@calcomassn.org
CalCom
2018 HR/Safety Committee Award

SAFETY LEADERSHIP

ELIGIBILITY: Any employee (management or non-management) of a CalCom Member Company may be nominated.

ENTRY PROCEDURES: To make a nomination for this award, complete this form and return it to the CalCom office by September 18, 2019.

The individual award will be $1000 CASH and a plaque, which will be presented at the CalCom Annual Conference Awards Ceremony.

JUDGING
Members of the CalCom HR/Safety Committee will serve on the Judging Committee and judging will be based on the following criteria:

Contributions to the field of safety – examples:
✓ Safety Committee participation
✓ Safety suggestions
✓ Safety training
✓ Innovative Safety Program(s)
✓ First aid or CPR training in community or schools
✓ Participation in local safety organizations or programs

Type or print:

>> Nominee's Name & Title: __________________________________________________________
Company: _______________________________________________________________________
Mailing Address: __________________________________________________________________
Phone: __________________________ Fax: __________________________

> Supervisor’s Name and phone number if different than person listed below.
Name: __________________________ Phone: __________________________

>> Nominator's Name & Title: _______________________________________________________
Company: _______________________________________________________________________
Mailing Address: __________________________________________________________________
Phone: __________________________ Fax: __________________________
CALCOM SAFETY LEADERSHIP AWARD

Entry Deadline – September 18, 2019

Use space below and additional pages as necessary. Return to:

CalCom
601 University Avenue, Suite 177
Sacramento, CA 95825

Fax: 916.922.3648 / Email: mariann@calcomassn.org

Please list and describe your nominee’s contributions in the field of safety. Attach any appropriate documentation and additional pages as necessary.