# **Right to Refuse Unsafe Work - Refusal Tracking Form**

<b>Personal Information</b> – To be completed by the person exercising their right to refuse						
First Name	Last Name	Work Location				
Task Being Refused: Identify which aspect(s)	of your work you believe are unsafe					
Attach additional pages as needed						
Reason for Refusal: Describe the hazard you	believe makes your work unsafe					
Attach additional pages as needed						
Refusal Reported To:						
Supervisor Name	Date	Time				
Employee Signature:						

## Work Refusal: Employer Investigation - To be Completed by Supervisor

Corrective Action Taken:	Yes	(describe below)	No	(corrective action not necessary)			
Describe Any Corrective Action Taken – Outcome of Investigation Must be Reported Back to Employee – Attach additional pages as needed							
Supervisor Signature:							

#### Outcome of Employer Investigation - To be completed by the person exercising their right to refuse

Are you satisfied with the outcome of the investigation:	Yes	(I will resume the refused task)	No	(Refer my refusal to the JOHS Committee)
Employee Signature:				

### Work Refusal: JOHS Committee Investigation - To be completed by Co-chairs or designates appointed by Co-chairs

Unanimously Advise Worker to Return to Work (vote):	Yes	No				
Recommendations Made to Employer:	Yes (detail belo	v) No				
Detail all Recommendations Made as a Result of the Investigation – Outcome of Investigation Must be Reported Back to Employee – Attach additional pages as needed.						
Employer Co-Chair Signature:		Employee Co-Chair Signature:				

# Outcome of JOHS Committee Investigation - To be completed by the person exercising their right to refuse

Are you satisfied with the outcome of the investigation:	Yes	(I will resume the refused task)	No	(Refer my refusal to a Dept. of Labour Health & Safety Officer)
Employee Signature:				