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| **McMaster University*****[Name]* Joint Health and Safety Committee****MINUTES****Date**: day, month, year**Time**: **Location**: Building, room number or Virtual |
| **Present**(v) | **Absent**(v) | **Name** | **Member Category**(\*) | **Certified Member** (v) | **Work Location** **(Department)** |
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| (\*) **W** - Worker/Non-management (if unionized, record name of union)  **M** - Management  **A -** Advisor to Committee |
| **Guests:** (list name, title, department) |
| **WELCOME:** *Introductions if needed, acknowledge new members, land acknowledgement, confirm quorum* |
| **MINUTES OF PREVIOUS MEETING:** *Statement to indicate minutes of previous meeting have been read and acknowledged, corrections if applicable, approve minutes* |
| **BUSINESS ARISING FROM PREVIOUS MINUTES:** *Description, actions taken, recommendations, person responsible for follow up* |
| **NEW BUSINESS:** |
| **OTHER:** |
| **NEXT MEETING:****Date**: day, month, year**Time**: **Location**: Building, room number or virtual |
| **SIGNATURES:** *[Worker Co-Chair] [Management Co-Chair]*cc. University Health and Safety |