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Recognize Your Participation

OMB Control Number 1218-0269
Expiration date: August 31, 2027

Safe + Sound Week Event Feedback Form

To download a Safe + Sound Week certificate of recognition and challenge coin for your organization's participation, please fill out the required information below. We also hope that you will help us by answering a few optional questions about your participation and giving us feedback on our efforts. Please note that you are not required to request a Safe + Sound Week certificate of recognition or challenge coin and that if you choose to do so, OSHA will not use the information or feedback you provide for any purpose other than evaluating Safe + Sound Week and planning future outreach efforts. Also note that the certificate of recognition and web badge do not represent an assessment of compliance with OSHA standards at your worksite(s).

If you have issues with the certificate download, please email safeandsoundcampaign@dol.gov for assistance.

Congratulations and thank you for participating in Safe + Sound Week!

The fields indicated with an asterisk (*) are required to complete your submission.

Important

To help keep things organized, please register your business only once per location. If you need assistance, please email safeandsoundcampaign@dol.gov.

Participant Location:

Did you participate in a U.S. State or Territory?*

Yes

No

State:*

- Select a State -

City:*

- Select City -

Country:

United States

Participant Information:

Name of Business or Organization:*

Select or Enter Full Business or Organization Name

Email Address:*

Enter Contact Email Address

Industry (select all that apply):*

Agriculture, Forestry, Fishing and Hunting
Construction
Government
Health Care and Social Assistance
Manufacturing
Maritime
Oil and Gas
Professional and Business Services

How did you find out about the event? (check all that apply):*

- Participation in prior years
- National/Local/Trade Press
- Communication from industry/trade-specific association
- Internet Search
- Communication from safety and health professional organization
- Online Advertising
- OSHA QuickTakes
- Social Media
- OSHA Website
- Colleague/co-worker
- OSHA Staff or Program
- I don't know/remember
- Safe + Sound Campaign Email List Serv
- Other

Number of workers reached during your Safe + Sound Week event(s):*

Enter Numbers Only

What was your primary motivation for participating in Safe + Sound Week?:

- Celebrate meeting safety and health goal(s)
- Engage workers in thinking about safety and health (e.g., get feedback, provide training, provide recognition, teambuilding)
- Launch a new safety and health activity/initiative
- Improve my organization's safety and health performance
- Respond to a specific safety and health issue within my workplace
- Show leadership in our industry on safety and health
- Other

Participating in Safe + Sound Week had a positive impact on safety & health in my organization.:

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree	NA
Participating in Safe + Sound Week had a positive impact on safety & health in my organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Would you recommend participating in Safe + Sound Week to others? Why or why not?:

- Yes
- No

What did you like most about Safe + Sound Week?:

Add a brief description of what you liked most about S+S Week

0/1500

Is there anything else you would like to share?:

Add anything else you would like to share.

0/1500

To help us better understand how participants used resources and what would be helpful in the future, Safe + Sound may wish to reach out to you for more information on your experience. Are you interested in sharing more about your experience?:

- Yes
- No

Sign me up for the monthly Safe and Sound at Work email listserv. I want to receive communications on resources and upcoming events.:



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Public reporting burden for this voluntary collection of information is estimated to average 3 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. OSHA will use this information to evaluate participation in Safe + Sound Week. Persons are not required to respond to the collection of information unless it displays a current valid OMB control number. If you have any comments about this estimate or any other aspects of this data collection, including suggestions for reducing this burden, please send them to OSHPRA@dol.gov or to US Department of Labor, OSHA Directorate of Standards and Guidance N-3609, 200 Constitution Avenue, NW, Washington, DC 20210.