

Safe + Sound Week | Occ x

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HOME STEP 1: SELECT YOUR ACTIVITY STEP 2: PLAN A STEP 3: RECOGNIZE SAFE + SOUND

Participating in Safe + Sound Week can host an event just for you and tools to help you plan and certificate and web badge to...

Safe + Sound Week 2

AK

MP

GU

Safe + Sound Week Register Participation Web-Form

NOTE: This form performs best on the latest versions of Google Chrome, Microsoft Edge, and select mobile browsers.

Name of Business or Organization*

Industry*

Email Address*

Are you participating in the U.S.?* Yes No

City/State/Zip Code*

Are you hosting an event that is free and open to the public? Yes No

Note: Only details about events that are free and open to the public will be posted. For all other participants, only the name of the business or organization and the location will be posted.

If your organization is registering multiple sites/locations, please contact safeandsoundcampaign@dol.gov to receive an excel spreadsheet that can be used to submit your information.

Submissions are not added to the map automatically. New additions are reflected within 1-2 business days.

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OMB Control Number XXXX-XXXX

Expiration date: XX/XX/XXXX

PAPERWORK REDUCTION ACT

Public reporting burden for this voluntary collection of information is estimated to average 1 minute 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 OSHAPRA@dol.gov or to US Department of Labor, OSHA Directorate of Standards and Guidance N-3609, 200 Constitution Avenue, NW, Washington, DC 20210.

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Please provide details and contact information to be posted for the public event:

Event Name*

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Please provide details and contact information to be posted for the public event:

Event Name*

Event Date*

Event Start Time*

Event End Time*

Event Description*

Event Website

Contact Name*

Contact Email or Phone Number*

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