



2010 Advantage Programs Year-end Achievement Report

Sponsor Name:	
Firm Name:	Date (dd/mmm/yyyy):
WSIB Account #:	WSIB Firm #:
Completed By:	Year One Year Two _____ (check applicable year) _____
Telephone:	

Element	Has a standard been set?	Has the standard been communicated?	Has applicable training been completed?	Has the element been evaluated or an evaluation plan developed?	Have you made improvements & acknowledged success?	Comments
Management Review						
Hazard Recognition						
Risk Assessment						
Control Activities						
Return to Work						
Signature: (Senior Management)				Joint Health & Safety Committee Chair (Optional)		