



Right to Refuse Dangerous Work Report Form

Important: The Right to Refuse Process begins after the Report and Resolution of Safety Concerns Process has been followed. Employees must inform their supervisor/manager of a Right to Refuse Dangerous Work situation immediately. Immediate response from the supervisor is required when an employee has exercised his/ her right to refuse dangerous work.

“Dangerous” work generally means: work involving safety and health risks that are not normal for the job and will cause immediate and serious, or long term effects on your safety and health or the safety and health of others.

A worker may refuse to perform work they believe is dangerous (see definition above) on reasonable grounds when the Report and Resolution of Safety Concerns Process has been unsuccessful. Report refusal to supervisor immediately.	
This Section to be filled out by refusing worker, in person or by phone or email.	
Name of Refusing Employee:	
Position of Employee:	
Date of Refusal:	Time of Refusal:
Name of Supervisor Receiving Report:	
Supervisor's Phone:	Supervisor's email:
DESCRIPTION	
This Section to be filled out by the supervisor	
Supervisor shall immediately investigate/inspect and remedy the dangerous condition(s) where identified.	
SUPERVISOR INVESTIGATION DETAILS	
<input type="checkbox"/> Dangerous Condition Identified and Remedied <input type="checkbox"/> No Dangerous Condition Identified	



SUPERVISOR INVESTIGATION RESULTS	Explain Results – details of corrective action or reason why the work does not constitute a danger.
CONTINUED REFUSL DETAILS	<i>If remedied then the Refusal is resolved. Worker may continue to refuse (If refuser believes work is still unsafe). Reasons for continued refusal are entered.</i>
Resolution	
<p>Please note: The supervisor and refusing worker sign below when the Right to Refuse Dangerous Work case has been resolved and closed. Refusing worker's signature indicates that the worker agrees that the dangerous condition has been remedied.</p> <p>_____ Supervisor's Signature</p> <p>_____ Date</p> <p>_____ Employee's Signature</p>	