



# AWARDS PROGRAM

*Quality People. Quality Projects.*

## 2019 Build Nebraska Awards—Safety Form

### To be first page in Safety section of each entry

*Please place this form as your first page behind the safety tab of your entry. No project with a safety-related fatality, regardless of contractor or trade, is eligible to receive consideration for the Build Nebraska Award.*

1. Total man-hours for all disciplines included in your contract on this project: \_\_\_\_\_  
(Include all specialty contractors' hours on this project.)
2. Name and title of person responsible for safety:  
\_\_\_\_\_
3. Were there any innovative safety and health programs used specific to this project?  
☐ Yes ☐ No  
Explain: \_\_\_\_\_
4. Were toolbox safety meetings held? ☐ Yes ☐ No Documented? ☐ Yes ☐ No  
How Often? \_\_\_\_\_ Include a one page summary or an actual example.
5. Was specialized training conducted on this project? ☐ Yes ☐ No If Yes, what types?