

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0".
Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0 (G)	0 (H)	0 (I)	10 (J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0.00 (K)	0.00 (L)

Injury and Illness Types

Total number of... (M)	(4) Poisonings	(5) Hearing Loss	(6) All other illnesses
(1) Injuries: 10	0	0	0
(2) Skin disorder: 0			
(3) Respiratory conditions: 0			

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Establishment information

Your establishment name: Cornell College

Street: 600 First Street SW

City: Mount Vernon State: IA ZIP: 52314-1098

Industry description (e.g., Manufacture of motor truck trailers): Higher Education

Standard Industrial Classification (SIC), if known (e.g., 3715): 221

OR: _____
North America Industrial Classification (NAICS), if known (e.g., 336212): _____

Employment information

(If you don't have these figures, see the worksheet on the OSHA Forms for Recording Work-Related Injuries and Illnesses to this estir. This document is available at www.OSHA.gov)

Annual average number of employees: 535
Total hours worked by all employees last year: 643128

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Autotry
Company executive

(819) 895-4244

Phone

Employee Relations Coord.
Title

2/1/17
Date