

01 SEP 2009

VR-53

CAPITAL EXPRESS

# ANYMOUSE

This form is your avenue for reporting unsafe conditions and practices. You are the key ingredient in the Command Safety Program! If you discover a hazard and are unable to take appropriate action to correct it, please let others know about it by utilizing this form.

Once completed, you may bring this form directly to the Command Safety Office (Rm. 201) or place it in the Anymouse box located on the first deck central passage way. If you wish to remain anonymous, place it in the box unsigned or slip it under the Command Safety Office door.

*This form will go all the way up the Chain to the Commanding Officer!*

SPECIFIC LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

DESCRIPTION OF HAZARD OR PRACTICE (use back if needed): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ANY ACTION YOU HAVE TAKEN TO CORRECT THE HAZARD: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YOUR RECOMMENDATIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MAY THE SAFETY DEPARTMENT CONTACT YOU FOR ADDITIONAL INFORMATION? YES \_\_\_\_\_ NO \_\_\_\_\_

NAME/PHONE (OPTIONAL): \_\_\_\_\_

(FOR SAFETY DEPARTMENT USE)

COMMAND SAFETY DEPARTMENT INITIAL ASSESSMENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SAFETY OFFICERS INITIAL RESPONSE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMANDING OFFICERS RESPONSE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CORRECTIVE ACTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TITLE: \_\_\_\_\_ SERIES: \_\_\_\_\_