## **JOHSC Meeting Report**

1. ADMINISTRATION							
Production Name:							
Meeting No.	:	Date:		Location:			
IN ATTENDANCE							
NAME			TITLE				
REGRETS							
NAME			TITLE				
NAIVIE			IIILE				
GUESTS							
NAME			TITLE				
MEETING START TIME:			MEETING FINISH TIME:				
2. REVIEW OF MINUTES OF LAST MEETING							
☐ Approved as prepared ☐ Approved as amended herein:							
3. MATTERS ARISING/CARRIED OVER FROM PREVIOUS MEETINGS							
ITEM#	DISCUSSION/ACTIO		STATUS		PERSON		
			STEPS/1	TIMELINES	RESPONSIBLE		
	1		l				

5. REVIEW OF WORKPLACE INSPECTIONS/HAZARD REPORTS (ATTACHED)							
□ YES □ NO							
Notes:							
6. NEW BUSINESS							
ITEM #							
II EIVI #	DISUCSSION/ACTION ITEM	STATUS/NEXT STEPS/TIMELINES	PERSON RESPONSIBLE				
		STET S/ THVIELINES	INEST CHOIDEE				
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7. TRAINING COURSES TO BE SCHEDULED							
TRAINING		ATTENDEES					
8. SIGNATURE AND ACKNOWLEDGEMENT							
Employer Co		Worker Co-Chair					
Name:		Name:					
Sign:		Sign:					
9. DISTRIBUTION							
For Review:							
☐ Production Manager							
☐ Production Safety Representative(s)							
After Review:							
☐ Post on all health and safety notice boards (keep the last three meetings posted)☐ Distribute to all Joint Health and Safety Committee Members							
☐ Distribute to BC Council of Film Unions							
NEXT MEETING DATE:							