



Location Health and Safety Plan

Complete this form for each work location.

Company Name: _____

Location: _____

In-Country Contact: _____

Keep a copy of each plan with you for reference on site.

As you complete this plan, remember that how close you are to hazards and how long you are exposed, may affect your risk of being injured or becoming sick. For example, if you keep a safe distance away from the moving parts of machinery, you will be less likely to be injured. Viewing a noisy operation from an inside area that separates you from the source of the sound will help protect you against harmful noise.

Questions to ask yourself:

1. What hazards am I most likely to face?

a. _____

b. _____

c. _____

2. What resources—at home or close by—can I use to be safer around these hazards?

a. _____

b. _____

c. _____



SMALL BUSINESS INTERNATIONAL TRAVEL RESOURCE LOCATION PLAN

3. What should I discuss with my employer to protect me from these hazards?
- a. Training in how to recognize and avoid specific hazards
 - b. Training in selecting and using personal protective equipment (PPE)
 - c. Evacuation plan for home and local contacts to use in case of emergency or for questions about possible hazards
4. Important contacts, such as country hosts, managers, health and safety personnel, law enforcement agencies, and healthcare facilities.

Contact: _____ Phone: _____

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