

Submission for Participation in WSH Advocate Programme

INSTRUCTIONS

1. You will require about 10 minutes to complete this form.
2. You may need to refer to the "Guidance Notes" before submitting this form. Refer to Page A1 and A2 for the "Guidance Notes".
3. All sections must be completed, please indicate NA in the fields which are not applicable to your organisation.
4. Completed application form may be submitted through the following ways:
 - a. Electronically to contact@wshc.sg;
 - b. Direct mailer to the address stated above; or
 - c. Fax to the fax number stated above.
5. All information submitted must be complete, accurate, true, correct and consistent with the supporting documents (if necessary). Failure to do so will result in delay in processing or rejection of the submission.

SECTION A: COMPANY PARTICULARS

ACRA No:		
Company Name:		
Address:		
Company website :		Email :
Tel:		Fax:
Industry Sector <i>*Please tick one</i>	<input type="checkbox"/> Chemicals <input type="checkbox"/> Construction <input type="checkbox"/> Engineering <input type="checkbox"/> Financial and Insurance activities <input type="checkbox"/> Food and beverages <input type="checkbox"/> Government and statutory agencies <input type="checkbox"/> Healthcare <input type="checkbox"/> Hotels and premises that provide lodging for commercial gains <input type="checkbox"/> Logistics and transportation	<input type="checkbox"/> Landscape care & maintenance service activities <input type="checkbox"/> Manufacturing (Metal) <input type="checkbox"/> Manufacturing (Non-Metal) <input type="checkbox"/> Marine <input type="checkbox"/> Oil and gas <input type="checkbox"/> Veterinary <input type="checkbox"/> Water supply, sewerage and waste management activities <input type="checkbox"/> Wholesale and retail trade <input type="checkbox"/> Others _____
Number of employees:		

SECTION B: LIAISON OFFICER PARTICULARS

Name:	Designation:	
Tel:	Mobile:	Email:

SECTION C: SURVEY ON EMPLOYEE PARTICIPATION IN WSH

No	Question	Reply (Please tick one only)	
1	Is your company new to the WSH Advocate programme?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	Does the management commit and support employees' involvement in WSH?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	Does your company have any form of WSH training for the WSH Advocates?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	Has your company developed any material on WSH for internal use (e.g., posters, brochures, guidelines, badges, etc)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5	Does your company have any events that promote employees' involvement in WSH? (e.g., Pledge for Zero, HSE Day/ Carnival, Safety Talks/ Seminars, etc)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6	Does your company provide any channel for employees' feedback or suggestions on WSH (e.g., dialogue sessions, etc)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7	Does your company reward employees who participate or contribute to WSH?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SECTION D: DECLARATION BY MANAGEMENT

<p>I hereby declare that:</p> <ol style="list-style-type: none"> I am the CEO/MD/Senior management of the organisation and would like to participate in the WSH Advocate Programme. All the particulars, information and supporting documents given in this submission are true and correct as of the undersigned date. I have read, understood and shall abide by the conditions as set out in the Guidance Notes (Refer to page A1 and A2 of this document) for WSH Advocate Programme. 	
Name:	Company Stamp:
Designation:	
Signature:	Date:

*** to delete as appropriate**

WSH Advocate Programme - Guidance Notes -

Definitions:

- “WSHC” refers to the Workplace Safety and Health Council
- “WSH” refers to Workplace Safety and Health
- “Advocate” refers to a person who promotes safety, encourage safe behaviour and changes mindsets, as a way of life in his/her workplace. Their roles may include but not limited to:

Voice	– WSH Advocates serve as feedback and communication channels between management and workers
Observe	– WSH Advocates look out for the unsafe acts and conditions at workplace and act as another pair of eyes for safety and health
Involve	– WSH Advocates walk the safety talk and are very involved in safety and health activities
Care	– WSH Advocates encourage their fellow colleagues to care for the safety and health of one another
Educate	– WSH Advocates help their fellow colleagues to reinforce on the learning points from past incidents

Criteria / Requirements

- 1.1 All companies are able to participate in the WSH Advocate Programme by submitting the Application Form to contact@wshc.sg;
- 1.2 There is no expiry date to the acknowledgement of WSH Advocate Programme;
- 1.3 Recognition or participation in the WSH Advocate Programme, including any audits conducted thereto and/or in conjunction with WSH Advocate recognition, as a WSH Advocate Company will not absolve a business, company or organisation of any of its duties, obligations and requirements under Workplace Safety and Health Act (WSHA) and the regulations made there under.

Suspension or Revocation of WSH Advocate Participation

- 2.1 WSHC reserves the right to suspend or revoke a participating company or company's WSH Advocate participation at any time;
- 2.2 During the suspension period, the company's information will be removed from the WSH Advocate website. All company's collaterals that have indicated its WSH Advocate programme, such as the use of the WSH Advocate logo, shall be discontinued.

Cessation of Business

- 3.1 Any company acknowledged by WSHC in WSH Advocate participation that intends to cease its business operations or is facing insolvency or bankruptcy proceedings will notify WSHC in writing within 14 calendar days of such intent or proceedings.

Termination of Participation

- 4.1 Any company acknowledged by WSHC in WSH Advocate participation may terminate its participation in the WSH Advocate Programme by giving WSHC 30 calendar-days notice in writing;
- 4.2 Upon any such termination, the company must discontinue the use of all services and benefits under the WSH Advocate Programme.

Inspection and Audit

- 5.1 WSHC reserves the right to carry out a verification inspection and/or audit at a company acknowledged by WSHC in WSH Advocate participation.
- 5.2 The company will fully cooperate with WSHC at such inspections and audits

Programme Revision and Updates

- 6.1 WSHC reserves the right to revise criteria of the WSH Advocate Programme at any time. WSHC may change the contents of this terms and conditions and/or create new terms or conditions at any time by notifying the participating company or organisation of the changes. The changes will take effect on the date specified in the notice. WSHC will alternatively notify the participant company or organisation of such changes via online message broadcast on the WSH Advocate website or in such manner as WSHC deems appropriate.

Intellectual Property

- 7.1 The intellectual property rights arising from the WSH Advocate Programme, including the WSH Advocate name and WSH Advocate logo and relevant WSH Advocate training material, are owned, licensed and controlled by WSHC.
- 7.2 No part or parts of the WSH Advocate logo may be reproduced, distributed, adapted, modified, published, displayed, broadcasted or transmitted in any manner or by any means without the prior written consent of WSHC.
- 7.3 The WSH Advocate logo will not be used by a company or organisation to indicate its WSH Advocate participation other than/unless expressly allowed/provided for by WSHC.

Fees

- 8.1 The WSH Advocate Programme does not require any joining fee.