Section 1: Personal Particulars

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| --- | --- | --- |
| Name (in full): | | |
| Organisation (Company / Government Body / Association etc.): | | |
| Designation: | | |
| Email Address: | | |
| Tel (Office): | Tel (Mobile): | Fax: |

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Email: [contact@wshc.sg](mailto:contact@wshc.sg)

3. The Workplace Safety and Health Council reserves the right to accept or decline any suggestion made in the comments proposed by the commenter.

Section 2: Details and Commentary

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| Title of Guidelines: Return-To-Work | | |
| Page & Paragraph No. | Subject | Comment |
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