UNIVERSITY OF MINNESOTA

Safety Fund Authorization & Disbursement Form

UM 1740 Rev: 2/26

The purpose of the University Safety Fund is to promote a safe and healthy working environment for University employees by funding workplace safety and health improvements and upgrades.

Instructions: Email completed form to the Office of Risk Management for review, at orm@umn.edu.

1. APPLICANT INFORMATION

Requestor:	Phone:	E-mail:
University Department/Area:	EFS Account:	Amount Requested: $

2. EMPLOYEE SAFETY ISSUE/CONCERN (Attach separate sheet if necessary.)

Provide a brief description of employee safety issue:
Frequency and/or severity of safety issue:
Possible solutions considered:
Proposed solution and reason for selection:
Expected outcome:

3. ELIGIBLE EXPENDITURES

☐ Durable Safety Equipment (Machine Guards/Alarms, etc.) Durable Job ☐ Tools (Lifts, Ergonomic Aids, etc.) ☐ Other:	☐ Educational Training ☐ Program One-time ☐ Program Recurring Program Description:
Excluded Expenditures Personal protective equipment and consumables typically required to perform job duties, i.e. protective eyewear or goggles, respirators, dust masks, special clothing, first aid supplies, latex gloves, etc.	Safety equipment integral to the building structure and essential to its current or intended use or maintenance, i.e. fire alarms, fire protection/control, handrails, barriers, general HVAC, etc.

4. AUTHORIZATION

Office of Risk Management	Signature:	Date:

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