OSHA's Form 300A (Rev. 01/2004) Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases Total number of Total number of Total number of cases Total number of deaths cases with days with job transfer or other recordable away from work restriction cases 69 66 0 20 (G) (H) (I) (J) Number of Days Total number of Total number of days of days away from job transfer or restriction w∩rk 1,582 1.381 (K) (L) Injury and Illness Types Total number of...

(M) (1) Injury	149	(4) Poisoning	0
(2) Skin Disorder	1	(5) Hearing Loss	1
(3) Respiratory Condition	4	(6) All Other Illnesses	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.



Form approved OMB no. 1218-0176

Establish	ment information				
Your	establishment name University of W	ashington	All Locations, exc	ept Hospitals	
Street	t 201 Hall Health Center				
City	Seatle	State	WA		Zip 98195-4400
Indus	try description (e.g., Manufacture of mot Colleges and Universities	or truck trai	ilers)		
Stand OR	lard Industrial Classification (SIC), if kno	wn (e.g., Sl	IC 3715)		
North	American Industrial Classification (NAIC 611310	CS), if know	vn (e.g., 336212)		
Employm	ent information				
Annual	l average number of employees	39,129			
Total h last yea	ours worked by all employees ar	38,287,7	777		
Sign here	e				
Know	vingly falsifying this document may re	sult in a fir	ne.		
l certi comp	fy that I have examined this document a lete.	nd that to th	he best of my know	ledge the entries are true, a	ccurate, and
Març	garet Shepherd Shepherd Date: 2021.01.29 12:33:1			Chief of Staff, Office	of the President
	Margaret A. Shepherd			Ті	tle
_	206-543-7262 (EH&S)			January 2	9, 2021
	Phone			D	ate