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



U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

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 accurate

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.

Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases	
(H)	(1)	(J)	
	Total number of days of job transfer or restriction		
	54		
_	(L)	-	
Туреѕ			distribution of
39	(4) Poisoning	0	
0	(5) Hearing Loss	1	
	cases with days away from work 10 (H)	cases with days away from work 10	cases with days away from work 10 5 0ther recordable cases (I) (I) (J) Total number of days of job transfer or restriction 54 (L) Types 49 (4) Poisoning 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 that collection, contact. US Department of Labor, OSHA Office of Statistics, Room N-3844, 200 Constitution Ave. NW. Washington, DC 20210. Do not send the completed forms to this office.

Establishment information	
Your establishment name Western Carolina University	
Street 3476 Old Cullowhee Road	
City Cullowhee State NC	Zip28723_
Industry description (e.g., Manufacture of motor truck trailers) University	
Standard Industrial Classification (SIC), if known (e.g., SIC 3715)	
OR North American Industrial Classification (NAICS), if known (e.g., 336212) 6 1 1 3 1 0	
Employment information	
Annual average number of employees 2,919 Total hours worked by all employees last year 3,567,204	
sign here	
Knowingly falsifying this document may result in a fine.	
I certify that I have examined this document and that to the best of my knowledge the Company executive (828)227-7443 Phone	e entries are true, accurate, and complete. VC Administration & Finance Title 2.26.24 Date