Safety and You!	Subject:	Employ	yee Career (eer Conversations				
Steward Observatory Environment, Health, & Safety Manual	Section:	IV		Date:	10/01/2018 ((rev 2)	Page 1 of 3	
	NIVERS	SITY					IVERSATIONS	
			flaction than	ch aroc wit		riven. Deve	lopment-oriented. Simple	
Step 1: employee Employee's Name					pervisor's Name	Click or to	a bara ta aptar tayt	
		Click or tap here to enter tex Click or tap here to enter tex					p here to enter text.	
Employee's Title				Su	pervisor's Title	CIICK OF ta	p here to enter text.	
Department/Unit Reflection Period	CIICK	Click or tap here to enter text						
from	Click	here to en	ter a date.	to		Click here	to enter a date.	
			ACKNOWLED	GING ACC	OMPLISHMENT	r S		
At least 3 of my no Click or tap her Supervisor's Respo	re to ente nse:	r text.	nts during this re	flection per	iod			
Click or tap he	re to ente	er text.			STRENGTHS			
Click or tap her Supervisor's Respo Click or tap her	nse:							
			SETTING	GOALS FO	OR SUCCESS			
At least 3 goals I w	ould like	to work tov	vard during the r	next 6-12 mo	nths			
Click or tap he		er text.						
Supervisor's Respo		r tovt						
Click or tap he	re to ente	er text.	MAKIN	G SMART	CHANGES			
etc.) 1. Click 2. Click	or tap he or tap he	re to enter t re to enter t	t, stop, or change text. text.			my role (Focເ	is on behaviors, practices,	
-		re to enter t	text.					
Supervisor's Respo								
Click or tap he								
Step 2: Superviso Supervisor's Signa If employee's overa	ture _					Click he	esponses, and signs re to enter a date.	
Click or tap he	re to ente	er text.						
Step 3: employee	reviews	superviso	or's response,	adds optic	onal final comm	ents, and si	gns	
Employee's Signat			1	F	,		re to enter a date.	
Employee's Final Co		(optional)						
Click or tap he		,						
Employee ID:						Douolog	ed by the Division of Human Resources	

Employee ID: ____

of Human Resource Last Revised Summer 2018

Subject: Employee Career Conversations



Section: IV

Date: 10/01/2018 (rev 2)

SAFETY & TRAINING ADDENDUM To UA CAREER CONVERSATION For ASTRONOMY & STEWARD OBSERVATORY, DEPARTMENTS #0422 & #0404

Employee Name

EID#

Position Title (Full Title)

Period Covered:

to

For Completion by the Employee:

- I. SAFETY:
 - a. Do you have specific safety concerns with the work environment?
 - b. Do you perform activities in a safe manner. (Y or N):
 - c. Do you encourage safety of others on a regular basis. (Y or N):
 - d. Have you read, understood and supported the policies and procedures of the Steward Observatory Safety Manual? (Y or N):

For Completion by the Employee with the assistance of the Supervisor:

II. TRAINING and CERTIFICATIONS (This may include safety, required institutional trainings, outside work certifications, etc.)

Please complete and attach the EMPLOYEE RECORD OF SAFETY, TRAINING & CERTIFICATIONS and / or attach relevant records verifying training.





Section: IV

Date: 10/01/2018 (rev 2)

EMPLOYEE RECORD OF SAFETY, TRAINING AND CERTIFICATIONS TO THE UA CAREER CONVERSATION FOR THE DEPARTMENTS OF ASTRONOMY AND STEWARD OBSERVATORY

TRAINING	ASSIGNED BY	CYCLE	REQUIRED	DATE ASSIGNED	DATE COMPLETED	DATE OF PLANNED COMPLETION	NOTES
Example – PPE Uses	Supervisor	2 years	Yes	06/18/2018	08/20/2018	n/a	SO online presentation
Nondiscrimination / Anti- Harassment Policy Training	UA	Annual	Yes				
Driving	UA						
CPR / AED / First Aid	Supervisor						
Other Possible Required Trainings							
/ Certs.							
UA: Conflict of Interest / Conflict of Commitment / ITAR & EAR							
SO: CPR-AED-First Aid / Fall Arrest / Arc Flash							
				<u> </u>			