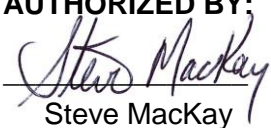


POLICY: SAFETY FOOTWEAR			NUMBER: S-1
			Page 1 of 3
PREPARED BY: Facilities Management (FM)	AUTHORIZED BY:  Steve MacKay	CLASSIFICATION: Safety Policy	EFFECTIVE: August 31, 2017
			SUPERSEDES: April 30, 2015

Facilities Management Personnel (as described below) are required, as a condition of employment, to wear C.S.A approved safety wear according to the guidelines laid out below.

A. GROUP I

Grade I, exterior green patch.

Affected Occupations:

Stationary Engineers	Stores personnel
Grounds workers	Trades Supervisors
Trades Personnel	Facilities Development & Engineering staff (when at a construction site)

B. GROUP II

Grade II, exterior yellow patch.
For indoor footwear: Grade II, interior yellow patch

Affected Occupations:

Indoor Footwear:	Outdoor Footwear:
Caretakers	Arena Maintenance

PROCEDURE FOR REIMBURSEMENT FOR CUPE MEMBERS:

- Annual safety shoe reimbursement:**

All active CUPE 2361 non-probationary Regular Full-Time, Sessional and Part-Time employees are entitled to an annual safety shoe reimbursement. Payment is made in January of each year and is included on the employee's regular direct deposit pay. For entitlement amounts please refer to Article 21 of the Collective Agreement between The University of Western Ontario and CUPE Local 2361.

- Winter boot reimbursement:**

Active CUPE 2361 non-probationary Regular Full-Time and Sessional Grounds employees are entitled to an annual winter boot reimbursement in the amount of \$80.00. Original proof of purchase must be submitted to their immediate supervisor. The supervisor will then submit the paperwork to Facilities Management's HR Administrator, who will process payment. Payment will be added to the employee's regular direct deposit pay.

PROCEDURE FOR REIMBURSEMENT FOR IUOE MEMBERS:

- **Annual safety shoe reimbursement:**

All active IUOE Local 772 Regular Full-Time employees are entitled to an annual safety shoe reimbursement. Payment is made in January of each year and is included on the employee's regular direct deposit pay. Any new employees will be reimbursed for safety shoes on their first regular pay. For entitlement amounts please refer to Article 17 of the Collective Agreement between The University of Western Ontario and IUOE Local 772.

PROCEDURE FOR REIMBURSEMENT FOR UWOSA MEMBERS:

- **Annual safety shoe reimbursement:**

Where a UWOSA employee is required by Western to wear safety footwear at work, employees are entitled to an annual safety shoe reimbursement. Payment is made in January of each year and is included on the employee's regular direct deposit pay. For entitlement amounts please refer to Article 47.01 of the Collective Agreement between The University of Western Ontario and The University of Western Ontario Staff Association.

PROCEDURE FOR REIMBURSEMENT FOR PMA MEMBERS:

1. Employee will obtain a "Safety Shoe and Insole Reimbursement Form" from Human Resources; also available electronically at: http://www.uwo.ca/hr/form_doc/benefits/form/safety_shoes.pdf. See below.
2. Employee will fill out the form, have it signed by the immediate supervisor, then return it to Benefits, Human Resources, Room 5100, Support Services Building, with the receipt obtained upon purchase of the footwear.
3. The University of Western Ontario will provide a cheque, released to the employee for the reimbursement.



Safety Shoe and Insole Reimbursement Form

<p>Requisitioner: - Submit to supervisor for signature - Retain a copy for your records - Attach original receipt to the form - Submit to: Human Resources, Rm 5100, Support Services Building - Inquiries to: (519) 661-2194</p> <p>REQUEST FOR REIMBURSEMENT (PLEASE COMPLETE ALL SECTIONS OF THIS FORM)</p> <p>LAST NAME _____ FIRST NAME _____</p> <p>UWO EMPLOYEE NUMBER _____</p> <p>DEPARTMENT/ROOM #/BLDG. _____</p> <p>POSITION _____</p> <p>DID YOU PURCHASE SAFETY TOES? YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p><u>CHECK THE APPROPRIATE</u></p> <p><u>PMA</u> <input type="checkbox"/> Yellow tag <input type="checkbox"/> Green tag <input type="checkbox"/> Reimburse for 1 year <input type="checkbox"/> 2 years <input type="checkbox"/></p> <p><u>Hospitality Services</u> <input type="checkbox"/> <u>Sessionals - Insoles</u></p> <p><u>Facilities Management</u> <input type="checkbox"/> <u>Grounds - Winter boot</u></p> <p><u>Graduate Teaching</u> <input type="checkbox"/> <u>Assistant - Initial pair</u></p>	
<p>I hereby authorize that the above named employee qualifies for subsidy for CSA Approved Safety Shoes or other footwear under the provisions outlined in the Collective Agreement.</p>		
<p>_____ Supervisor (Please Print)</p>	<p>_____ Supervisor Signature</p>	<p>_____ Date</p>
<p>_____ Supervisor Telephone #</p>		