

Montana Ag Safety

RECERTIFICATION | July 2013 - June 2014

1. **Which of the following items will enhance safety for you, your family and employees? (mark all that apply)**
 - ☐ Patience
 - ☐ Task preparation
 - ☐ Safety equipment
 - ☐ Getter-done attitude
 - ☐ All of the above
2. **What one item is involved in a large percentage of agricultural accidents and/or near misses?**
 - ☐ Horses
 - ☐ ATV's
 - ☐ Tractors
 - ☐ Cattle
3. **Your attitude as an owner/manager towards safety controls what?**
 - ☐ Your behavior
 - ☐ Your employee's behavior
 - ☐ Your spouse's attitude
 - ☐ Families' safety behavior
4. **The purpose of the Montana Safety Culture Act is to:**
 - ☐ Make sure State Fund gets their money
 - ☐ Encourage workers and employers to create a workplace safety philosophy
 - ☐ Create an increase in workers compensation rates
5. **An adequate safety program is one that only makes sure: fire suppressions systems, first aide stations, eye safety goggles and ear protectors are available for all workers.**
 - ☐ True
 - ☐ False
6. **How many years must an employer keep records of safety activities and program participation of employees?**
 - ☐ 1 year
 - ☐ 3 years
 - ☐ 5 years
 - ☐ 6 years
 - ☐ 7 years
7. **Agricultural operations with more than five (5) employees must have a safety committee that meets at least quarterly.**
 - ☐ True
 - ☐ False
8. **An operation that only hires one employee for a short time each year does not need to have a safety program under the rules of the Montana Safety Culture Act.**
 - ☐ True
 - ☐ False

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Your current Farm/Ranch Safety Policy Statement

Farm/Ranch Name

Owner/Operator

Address

City State Zip

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Phone

Email

Member of which Agricultural Association:

- ☐ MT Farm Bureau
- ☐ MT Stockgrowers
- ☐ MT Grain Growers
- ☐ MT Farmers Union
- ☐ MT Cattlemen's
- ☐ MT Wool Growers
- ☐ MT Pork Producers
- ☐ MT Organic

State Fund Policy Number

Policy Renewal Date

Please complete this form and mail to:
Montana Ag Safety Program
5 Stillwater Estates Road
Columbus, MT 59019