## OSHA's Form 300A (Rev. 01/2004)

## **Summary of Work-Related Injuries and Illnesses**

Year 2022

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

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 deaths	Total number of cases with days away from work 2	Total number of cases with job transfer or restriction	Total number of other recordable cases				
(G)	(H)	(1)	(J)				
Number of Days							
Total number of days away from work		Total number of days of job transfer or restriction					
205 (K)	-	221 (L)	-				
Injury and Illness Types							
Total number of							
(1) Injury ´	6	(4) Poisoning	0				
(2) Skin Disorder	0	(5) Hearing Loss	0				
<ul><li>(3) Respiratory Condition</li></ul>	1	(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, NIV, Washington, DC 20210. Do not send the completed forms to this office.

Establis	hment informa	ation							
You	r establishment na	me Moreno Valley Col	lege						
Stre	et 16130 Lasselle	e St.							
City	Moreno Valley		State	California	Zip _	92551			
Inde	Industry description (e.g., Manufacture of motor truck trailers)  Education								
	Standard Industrial Classification (SIC), if known (e.g., SIC 3715)  8 2 2 2  OR North American Industrial Classification (NAICS), if known (e.g., 336212)								
	61	121	0						
Employ	ment informati	on							
	,	er of employees _ all employees last _	918 693,925						
Sign here  Knowingly falsifying this document may result in a fine.									
con	plete. vei Tu	mined this document and	•	owledge the entries are true		isk Management Title			
<u>951</u>	-222-8128	Phone			1 Dat	/31/2023 re			