## Your internal contacts



Social Counseling	Occupational/Company Physicians
Name:	Name:
Phone:	Phone:
Email:	Email:
HR Department/Management	Occupational Safety Officer / The person in charge of occupational health management
Name:	Name:
Phone:	Phone:
Email:	Email:
Works Council/Employee Council	Other (e.g. Equal Opportunities Coordinator, Representative of Severely Handicapped Persons)
Name:	Name:
Phone:	Phone:
Email:	Email: