

NCC – NATIONAL CONCRETE & CONSTRUCTION NON-RETALIATION POLICY AND EMPLOYEE ACKNOWLEDGMENT FORM

Employee Name: _____

Job Title: _____

Project or Work Location: _____

Date: _____

NON-RETALIATION POLICY

At NCC – National Concrete & Construction, the safety of our employees, subcontractors, customers, and the public is one of our highest priorities. Every team member has the right and responsibility to report unsafe conditions and raise safety concerns without fear of punishment or retaliation.

NCC strictly prohibits retaliation against any employee or subcontractor who, in good faith:

- Reports a workplace injury, illness, near miss, unsafe condition, damaged equipment, or safety concern.
- Stops work when they reasonably believe a task or condition presents an immediate danger.
- Reports a possible violation of NCC's Safety Manual or applicable safety requirements.
- Participates in a safety meeting, inspection, investigation, or training.
- Cooperates with OSHA or another government agency.
- Exercises any workplace safety right protected by law.

PROHIBITED RETALIATION

Retaliation may include, but is not limited to:

- Termination or demotion.
- Reduced hours or loss of work opportunities.
- Unfavorable or punitive work assignments.
- Threats, intimidation, or harassment.
- Discrimination or unfair treatment.
- Any other negative employment action taken because someone raised or participated in a good-faith safety concern.

REPORTING A CONCERN

Employees who believe they have experienced or witnessed retaliation should report it immediately to one or more of the following:

Immediate Supervisor: _____

NCC Safety Representative: _____

Human Resources or Office Contact: _____

Company Owner or Manager: _____

Telephone Number: _____

Email Address: _____

Reports will be reviewed promptly and fairly. Information will be kept confidential to the extent reasonably possible.

Any person who violates this policy may be subject to disciplinary action, up to and including termination.

Knowingly making a false or malicious report is not protected by this policy. However, an employee will not be disciplined simply because a good-faith concern is later found to be mistaken or unsubstantiated.

Nothing in this policy limits an employee's right to contact OSHA or another government agency, participate in an investigation, or exercise any right protected by law.

EMPLOYEE ACKNOWLEDGMENT

By signing below, I acknowledge that:

_____ I received and reviewed NCC's Non-Retaliation Policy.

_____ I understand that I may report injuries, unsafe conditions, near misses, safety violations, and suspected retaliation without fear of punishment.

_____ I understand how and to whom safety concerns and suspected retaliation should be reported.

_____ I understand that I am responsible for immediately reporting unsafe conditions that could result in injury, property damage, or other harm.

_____ I was given an opportunity to ask questions about this policy.

My signature confirms that I received and understand this policy. It does not waive or limit any rights provided to me under applicable law.

Employee Printed Name: _____

Employee Signature: _____

Date: _____

Company Representative: _____

Representative Signature: _____

Date: _____

At NCC, speaking up for safety is not causing a problem—it is helping prevent one.

Form Number:

Effective Date:

Revision Number:

Approved By:

Completed forms should be retained with the employee's safety and training records.