Form Approved OMB no. 1218-0176

Summary of Work-Related Injuries and Illnesses

All establishments covered by part 1904 must complete this Summary page, even if no work related injuries or illneses occured during the year. Remember to view the Log to verify that the entries are complete and accuratebefore completing this summary.

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

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 Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction		Total numb other recor cases	
0	0	0		0	
(G)	(H)	(1)		(J)	
Number of	f Days				
Total number of day	ys		nber of days or restriction	of job	
0		0			
(K)		(L)			
Injury and	l Illness Type	s		18.5	
Total number of					
(M) (1) Injuries	_	0	(4) Poisonii	ngs	0
(2) Skin disorders	s	0	(5) Hearing	Loss	0
(2) Skin disorders	_				

Establis	shment informa	ition	
Your esta	blishment name	Ferris State University -	Urban Institute for
		Contemporary Arts	Croun mistitute for
Address	2 W. Fulton St.		
	Grand Rapids, M	i 49503	
Industry de	escription (e.g., Man	ufacture of motor truck trail	ers)
	University		
Standard I	ndustrial Classificati	on (SIC), if known (e.g., 37	715)
	8221		
OR			
North Ame	rican Industrial Clas	ssification (NAICS), if knowr	n (e.g., 336212)
	611310		
	ment information	on (If you don't have these page to estimate)	e figures, see the
Annual av	erage number of er	mployees	1
Total hours	s worked by all empl	loyees last year	104
Sign he	re		
Knowing	ly falsifying this	document may result i	in a fine
	th have examined the true, accurate, and		e best of my knowledge the
	UNI		Associate VP for
Company	executive Taylor, Gai	il	Finance Title
231-59	3888		1/24/2024
Phone	7000		Date

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 50 minutes per response, including time to review the instructions, 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 other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed form to this office.

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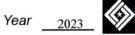
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Number of Cases Total number of Total number of cases Total number of Total number of cases with days with job transfer or other recordable deaths restriction away from work Cases (H) (G) Number of Days Total number of days of job Total number of days transfer or restriction away from work Injury and Illness Types Total number of... (M) (1) Injuries (2) Skin disorders Hearing Loss (3) Respiratory conditions (6) All other illnesses

Establishment information Ferris State University - Kendall College of Your establishment name Art & design FSU 17 Fountain St. NW Grand Rapids, Mi 49503 Industry description (e.g., Manufacture of motor truck trailers) University Standard Industrial Classification (SIC), if known (e.g., 3715) 8221 OR North American Industrial Classification (NAICS), if known (e.g., 336212) 611310 Employment information (If you don't have these figures, see the worksheet on the back of this page to estimate) Annual average number of employees 140 Total hours worked by all employees last year 175,232 Sign here Knowingly falsifying this document may result in a fine I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete. Associate VP for Title executive 1/24/2024

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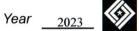
Number o	f Cases					
Total number of deaths	Total number of cases with days away from work		umber of b transfer tion	or c	Total number other record cases	
0	00	×	0		0	
(G)	(H)		(I)		(J)	
Number o	f Days		334			
Total number of da away from work	ys		I number sfer or res	of days of job striction		
0			0			
(K)			(L)	_		
Injury and	l Iliness Type	s				
Total number of						
(M)						
(1) Injuries	-	0	(4)	Poisonings		0
(2) Skin disorder	s	0	(5)	Hearing Los	s	0
(3) Respiratory of	onditions	0	(6)	All other illne	esses	0

Your establishment name Ferris State University - FSU Grand Rapids
Address 420 Oak St, PRK 150
Big Rapids, Mi 49307
Industry description (e.g., Manufacture of motor truck trailers)
University
Standard Industrial Classification (SIC), if known (e.g., 3715) 8221
OR
North American Industrial Classification (NAICS), if known (e.g., 336212)
611310
Employment information (If you don't have these figures, see the worksheet on the back of this page to estimate)
Annual average number of employees15
Total hours worked by all employees last year 20,696
Sign here
Knowingly falsifying this document may result in a fine
I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.
Associate VP for
Company executive Taylor Gail Title
231-591-3888 1/24/2024
Phone Date

Establishment information

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	THE RESERVE THE PROPERTY.				
Total number of deaths	Total number of cases with days away from work		nber of c transfer o n		umber of ecordable
0	11		7		14
(G)	(H)	(I)	(J)
Number o	f Days				
Total number of da away from work	iys		number o	f days of job riction	
567		2	85		
(K)		(L	.)	•	
Injury and	d Illness Type	s			
Total number of					
(M)					
(1) Injuries	_	32	(4)	Poisonings	0
	rs	0	(5)	Hearing Loss	0
(2) Skin disorder	_				

Your establishment name Ferris State University - Big Rapids Campus
Address 420 Oak St., PRK 153
Big Rapids, Mi 49307
Industry description (e.g., Manufacture of motor truck trailers) University
Standard Industrial Classification (SIC), if known (e.g., 3715)
OR
North American Industrial Classification (NAICS), if known (e.g., 336212)
611310
Employment information (If you don't have these figures, see the worksheet on the back of this page to estimate)
Annual average number of employees1,984
Total hours worked by all employees last year 2,696,676
Sign here
Knowingly falsifying this document may result in a fine
I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.
Associate VP for
Company executive Taylor, Gail Title
231-591-3888
Phone Date

Establishment information

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