

# OSHA's Form 300A

## 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 illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before 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 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 Part 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 cases with days away from work	Total number cases with job transfer or restriction	Total number of other recordables
0	3	0	5
(G)	(H)	(I)	(J)

Number of Days	
Total number of days away from work	Total number of days of job transfer or resiliation
10	0
(K)	(L)

Injury and Illness Types						
Total Number of... (M)	(1) Injuries	(2) Skin Disorders	(3) Respiratory conditions	(4) Poisonings	(5) Hearing loss	(6) All other illness
	9	0	0	0	0	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 14 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 Statistical Analysis, Room N-3944, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Monday, January 27, 2025

Establishment information	
Name	Rutgers University - Camden
Street	Rutgers, The State University of New Jersey Department of Risk Management
City	33 Knightbridge Road Piscataway State NJ Zip 08854
Industry description (e.g., Manufacture of motor truck trailers) Colleges, Universities, and Professional Schools	
Standard Industrial Classification (SIC), if known (e.g., 3719)	8 2 2 1
OR	
North American Industrial Classification (NAICS), if known (e.g., 336212)	6 1 1 3 1 0
Employment Information	
Annual average number of employees	1218
Annual hours worked by all employees last year	2,148,120
<b>Sign here</b>	
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.	
Signed by:	<u>William S Troy</u> EXECUTIVE DIRECTOR
Date	01/29/2025
Phone	848-932-3015