I  Scope

This procedure applies to all employees including student employees who are required to wear foot protection as part of their assignment.

II  Purpose

The purpose of this procedure is to describe the methods available to employees to obtain shoe protection.

III  Responsibilities

Environmental, Health & Safety (EH&S):
- Maintains an account with at least two local vendors to supply safety shoes as needed throughout the year;
- Maintains a list of all affected employees and provide authorization forms as needed

Appropriate Administrators and/or Supervisors/Managers:
- Maintain a current list of employees and student employees that require foot protection;
- Communicate all pertinent information to the affected employees regarding procedures to obtain protective footwear.

Full-time probationary or annual renewable employees and intermittent employees including temporaries and student assistants:
- If replacement shoes are requested, worn shoes must be supplied for inspection
- Follow this procedure to ensure you obtain appropriate protective footwear and are properly reimbursed;
- Utilize Protective footwear as required and take steps to protect and prolong the life of your safety shoes.

IV.  General Procedures

These procedures provide different options to allow the protective footwear user to assess specific shoe need and easily obtain the proper shoe.

A. Reimbursement Programs
1. Sonoma State University provides several selections of footwear from two different local stores. The selections are both low cut and high top boots. The authorization forms EH&S provides allows the employee to simply select from the pre-determined shoe list and obtain the necessary footwear.

3. Intermittent Employees  
After completing four months of continuous employment, intermittent employees such as temporaries or student assistants will receive 50% reimbursement toward the pre-purchased footwear from the authorized selection list. The remainder of the reimbursement will be provided at the end of an additional four months of service. If you are a student and require financial assistance, please contact the Associated Students and inquire about a short-term loan. Receipt must be provided and Non-Travel Reimbursement Form must be completed to receive reimbursement.

B. Procedures for Obtaining Shoes (Select Appropriate Classification)

1. New full-time probationary or annual renewable employees or full-time probationary or annual renewable employees whose assignments have changed significantly.

a. Appropriate Administrator identifies potential need for employee to wear protective footwear and contacts Environmental Health and Safety.

b. Environmental Health and Safety will consult with the Appropriate Administrator and employee to determine if protective footwear is required and what type is appropriate.

c. If protective footwear is required, Environmental Health and Safety will provide an authorization form to the employee for the purchase of protective footwear.

d. The employee selects from the available options and obtains protective footwear using the completed authorization form.

2. Full-time probationary or annual renewable employees already participating in the protective footwear program.

a. **SHOES ARE NOT AUTOMATICALLY REPLACED ANNUALLY.** The purpose of the safety shoe program is to ensure that employees are not exposed to foot crushing or cutting hazards through the course of their work. Employees are provided oil to assist in maintaining the shoes in good repair and are expected to make every effort to extend the life of the shoes.
b. Once the need for replacement boots has been verified visually by EH&S and authorization form for the proper footwear will be provided.
c. The form is then brought to the selected shoe store and shoes obtained.

3. Intermittent employees including temporaries and student assistants

a. Appropriate Administrator identifies potential need for employee to wear protective footwear and contacts Environmental Health and Safety.

b. Environmental Health and Safety will consult with the Appropriate Administrator and employee to determine if protective footwear is required and what type is appropriate.

c. If protective footwear is required, Environmental Health and Safety will immediately provide Toe Guards upon request. Intermittent employees wishing to obtain protective shoes or boots can request an Intermittent Employee Safety Shoe Reimbursement Form and are subject to reimbursement as described in Section IV, A, 3 of this procedure.

V. Available Options for Purchase of Protective Shoes or Boots

**Santa Rosa Shoe Mart** – Located on West Steele Lane and Cleveland in Santa Rosa.

**Red Wing Shoes** – Located on West Steele Lane and Cleveland in Santa Rosa.
Intermittent Employee Safety Shoe Reimbursement Form

This form is to be completed by the Appropriate Administrator responsible for the student employee requiring foot protection. Foot protection is required when foot crushing or cutting hazards are regularly encountered within the assigned job. If hazards are infrequently encountered toe guards are recommended. Please complete ALL spaces on form (incomplete forms will be returned). Must provide receipt and completed Non-Travel Reimbursement form to receive reimbursement.

Student Employee Name: __________________________ Address: __________________________

Employee Identification Number: __________

City/State/Zip: __________________________ Job Title: __________________________

Description of Foot Hazards (i.e., type, size weight, frequency): __________________________

Appropriate Administrator Name (please print): __________________________

The student employee reimbursement process is as follows:

- Total Reimbursement will not exceed $175;
- A disbursement of 50% of approved shoe cost will be issued during the last month of each semester of service for no more than two semesters;
- Shoes MUST be purchased within 10 working days of hire or with no less than 50% of the semester remaining to receive a disbursement for that semester;
- If you cannot afford the initial cost of the shoes toe guards are available or you can contact the Associated Students and inquire about a short-term loan.

Only the current semester will be counted toward shoe reimbursement.

Appropriate Administrator Signature: __________________________ Date: __________

(PLEASE SEND COMPLETED FORM TO EH&S/Salazar 2078) DO NOT WRITE BELOW LINE

Human Services Use Only:

Account Number: ____________ Date: ____________ Amount: ____________

EH&S Approval: ____________ Date: ____________ Amount: ____________

Reimbursement Payment Issued:

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