



POKA YOKE SUBMISSION FORM

Complete this form and return to your local Safety Representative to submit your Poka Yoke. To participate in the 2025 Poka Yoke Contest, submit this form by **Friday, November 7.**

Date: _____

Division: _____

Employee Submitting the Form: _____

Employees Who Contributed: _____

Include name and job title _____

Describe problem/concern or risk (attach BEFORE picture):

Describe the process used to evaluate potential solutions:

Describe the solution or Poka Yoke (attach AFTER picture):

How can this Poka Yoke benefit other locations?