

Employee Warehouse Suggestion Form

Employee Details:

- Full Name: _____
- Department: _____
- Role: _____

Suggestion Focus Area:

- Safety
- Efficiency
- Cost Reduction
- Employee Morale

Description of Current Issue:

Proposed Solution:

Expected Outcome:

- Reduced Operational Costs: Yes No
- Improved Safety Standards: Yes No
- Enhanced Workflow Efficiency: Yes No

Additional Notes or Comments:

Acknowledgment by Employee:

I, [Insert Employee Name], understand that my suggestion will be reviewed and considered based on its feasibility and impact.

Employee Signature: _____

Date: _____

Reviewer's Comments:

Reviewer Signature: _____

Date: _____