OSH India Awards 2026
Application form: MSME Safety Excellence Award

Award category	Description
MSME Safety Excellence Award	Recognizes micro, small and medium enterprises that have demonstrated outstanding commitment to occupational safety, health and wellbeing through effective risk management, innovation, leadership commitment and measurable safety outcomes.

Eligibility criteria

1. The applicant must qualify as a Micro, Small or Medium Enterprise as per applicable Government of India definitions and be operational in India for at least 1 year as of 31 March 2026.
2. Occupational safety, health, wellbeing, risk management or safety culture initiative must be implemented and operational between 01 April 2024 – 31 March 2026.
3. If the initiative was implemented prior to the eligibility period, applicants must demonstrate enhancements, improvements or measurable impact achieved during the eligibility period.
4. Initiative must be fully implemented and operational; ideation-only, development-stage or pilot-only initiatives are not eligible.

Important rules for participation

5. All questions must be answered. Incomplete forms will not be evaluated.
6. If a question is not applicable, please mention “Not Applicable”.
7. Responses should be supported with relevant evidence wherever applicable.
8. The final eligibility of the nominees is subject to the applicable Terms & Conditions.

Applicant information (For correspondence) *			
Name of Applicant ***(should be the authorized signatory)***		**Designation**	
Mobile Number		**Email ID**	

COMPANY GENERAL INFORMATION*

Company Information	
Name of the Organization *(same will appear on the trophy)*	
Date of Incorporation (DD/MM/YYYY)	
Registered Office Address	City: _____ State: _____ PIN Code: _____
MSME Registration Number	
MSME Category (Select one) • Micro: Investment ≤ ₹2.5 crore, Turnover ≤ ₹10 crore; • Small: Investment ≤ ₹25 crore, Turnover ≤ ₹100 crore; • Medium: Investment ≤ ₹125 crore, Turnover ≤ ₹500 crore	○ Micro ○ Small ○ Medium
Company Website	
Total Employees and Employees Covered by the Initiative	Total employees: _____ | Covered under initiative: _____
Total Sites / Locations and Sites Covered by the Initiative	Total Sites / Locations: _____ Sites / Locations Covered: _____
Contact Details	Telephone: _____ Email: _____

CASE STUDY

Answer all questions in a maximum of 250 words each

(Mention details implemented between 01 April 2024 – 31 March 2026)

Particulars	**Details**
Name of the Initiative *(in not more than 50 words)*	
Please mention the date when the initiative was launched	(DD/MM/YYYY)

Please mention the end date of the initiative	(DD/MM/YYYY) / Ongoing
MSME Safety Focus Area (Select all applicable)	☐ Occupational safety ☐ Health and wellbeing ☐ Risk management ☐ Safety culture ☐ Compliance ☐ Other: _____

1. How is the initiative aligned with the MSME's occupational safety, health, wellbeing and business priorities? Please describe the key workplace risks, safety challenges, compliance needs or operational constraints the initiative was designed to address.

2. What programs, systems, controls, low-cost interventions, practical solutions or innovative approaches were implemented as part of the initiative? Please explain the quality of implementation and how employees, supervisors and leadership were engaged to support adoption.

3. What measurable improvements have been achieved through the initiative? Please describe outcomes related to safety performance, incident reduction, risk reduction, compliance, employee participation, workplace wellbeing, productivity or operational continuity and long-term sustainability of improvements, including relevant baseline or before-after indicators wherever available.

Supporting Documentation:

Maximum 5 pages/slides per supporting document.

Please Mention the Supporting Documentation Provided Along with the Application

S. No.	Document Name	Description	Attachment
1	MSME Registration Certificate / Udyam Certificate*	Proof of MSME / Udyam registration	Upload File
2	Incorporation / GST Certificate*	Proof of organization registration	Upload File
3	Company Profile*	Overview of business operations, workforce, MSME category, safety risks and organizational structure	Upload File
4	MSME Safety Initiative Overview / Technical Dossier*	Detailed description of the initiative, objectives, implementation approach, MSME-specific constraints, workforce coverage, measurable outcomes and relevant supporting evidence	Upload File
5	Any Other Supporting Documents *(Optional)*	Additional evidence supporting the application	Upload File

DECLARATION BY THE APPLICANT*	
• **I declare that the information provided in this application form is true, accurate and complete to the best of my knowledge. I agree to abide by the rules and regulations of participation.**	
Name	
Designation	
Date	