**Shop safety training**

**Power tools**

Bench and pedestal grinder Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Band saw Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Miter saw Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Drill press Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Power cords and plug ends Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Hand grinder Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Table saw Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Cut-off saw Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Planer Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Access to electrical panel Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Ladders**

Self-supporting Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Non-self supporting Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Welding**

Gas welding Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Arc welding Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Personal protective equipment Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Gas cylinder storage Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Power service Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Housekeeping**

Spill kit Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Equipment Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Floor and surfaces Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Maintenance/housekeeping schedule Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**First aid**

First aid kit Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Eye wash station Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**First aid**

Storage Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Fire extinguishers**

Monthly check Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Yearly check Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Solvents and parts washing**

Solvents Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Parts washing Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Compressed air**

Appropriate nozzles Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Impact tools**

Hammers Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Chisels Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Punches Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Lifting equipment**

Blocks Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Jacks Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Hoists or cranes Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Structural considerations**

Wiring Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Lofts and edges Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Ventilation Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Stairs Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Walking surfaces Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**PPE (personal protective equipment)**

Hearing protection Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Face protection Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

PPE evaluation Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Eye protection Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Clean and ready to use Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

**Chain saw**

Chain brake and overall condition Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

PPE including leg protection Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

Other Date completed:\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**