



OBSERVATION FORM



As employer, it is your responsibility to ensure your operators receive training specific to the equipment and gear they will be using, as well as the situation in which they are working. The training presentation and written exam satisfies the requirements for classroom training. But to be in complete compliance, regulations dictate that operators/workers must also pass a practical examination administered by a qualified trainer.

This is the employer's opportunity to observe trainees in a controlled environment in order to assess whether they have successfully applied the principles from the classroom instruction.

While regulations do not specifically outline the extent of such an observation, you should take ample time to observe the trainee practicing the tasks they will be performing on the work site. At the very least, this should include carrying out a pre-shift inspection as well as other basic principles that govern safe operations or work practices.

If any voice and hand signals are required as part of the job, the trainee should also demonstrate an understanding of these signals and their corresponding functions.

To assist with this responsibility, we have provided a general form you may use when administering the practical examination. Feel free to modify this guide to create one more specific to your employee, equipment, worksite, or job needs.

HOW TO USE IT:

- 1** Simply **OBSERVE** the trainee's competency based on the modules included.
- 2** Follow the list, **CHECKING THE BOX** to indicate whether they satisfactorily performed each task.
- 3** When done, **SIGN AND FILE** this form along with the examination record and certificate.

WORK SAFE, STAY SAFE



OBSERVATION FORM

EMPLOYEE'S NAME: _____ TOPIC/EQUIPMENT: _____

EVALUATOR'S NAME: _____ TITLE: _____

The purpose of the evaluation form is to aid the evaluator in assessing the worker's competency to safely apply in the field the principles learned in the classroom. Items may be added or deleted depending on the working environment or the needs of your employees and company.

HEAT STRESS

SATISFACTORY?		TASK	REMARKS
YES	NO		
PRE-SHIFT (VISUAL, FUNCTIONAL):			
		Applies sunscreen	
		Wears pale, light, and loose clothing	
		Wears a hat or a similar head cover	
		Brings sufficient water	
		Brings extra socks and wears good shoes	
OPERATIONS:			
		Applies sunscreen multiple times a day	
		Drinks water or electrolyte rich fluids often throughout the day	
		Takes multiple breaks out of the heat	
		Elevates legs while resting	
		Recognizes symptoms associated with heat exhaustion and heat stroke.	
IN A MOCK EMERGENCY:			
		Identifies symptoms and begins taking action	
		Elevates the victim's legs	
		Loosens or removes victim's clothing	
		Gets victim to a cool place	
		Gets ice, or a cool cloth to help the victim cool down.	
		Calls 911	

Supervisor/Trainer Name & Signature

Date



OBSERVATION FORM

COLD STRESS ❄️

SATISFACTORY?		TASK	REMARKS
YES	NO		
PRE-SHIFT (VISUAL, FUNCTIONAL):			
		Applies sunscreen	
		Checks the weather and skies	
		Covers themselves with many layers	
		Brings sufficient water	
		Brings extra socks, wears good shoes, and gloves	
OPERATIONS:			
		Applies sunscreen multiple times a day	
		Drinks water or electrolyte rich fluids often throughout the day	
		Attempts to stay dry	
		Avoids participating in activities that will produce too much sweat	
		Recognizes symptoms associated with cold stress.	
IN A MOCK EMERGENCY:			
		Identifies symptoms and begins taking action	
		Calls 911	
		Finds a dry, warm location, or wraps the victim in blankets. If there is no warm location they block wind, snow, or rain.	
		Removes or replaces any wet clothing	
		Applies a warm compress if available, but doesn't use hot water directly	
		Allows person to rest and recover without touching them too frequently	

Supervisor/Trainer Name & Signature

Date