

SAFETY INSTRUCTION RECORD

NAME: _____
 CLASS OR PERIOD: _____
 INSTRUCTOR: _____

I UNDERSTAND THE SAFETY DEMONSTRATIONS GIVEN FOR THE OPERATIONS AND EQUIPMENT LISTED BELOW. I HAVE ALSO COMPLETED THE SAFETY TESTS THAT APPLY TO THE OPERATIONS AND EQUIPMENT LISTED.

MY SIGNATURE ON EACH OF THE LISTED ITEMS MEANS THAT I UNDERSTAND HOW TO PERFORM THESE OPERATIONS SAFELY AND I UNDERSTAND HOW TO USE THE TOOLS AND EQUIPMENT SAFELY. MY SIGNATURE ALSO MEANS THAT I AGREE TO USE ALL THE SAFETY PRECAUTIONS I HAVE LEARNED; I AGREE TO REPORT ANY UNSAFE CONDITIONS TO MY INSTRUCTOR; AND I WILL DISCUSS ANYTHING I AM UNSURE ABOUT WITH MY INSTRUCTOR.

DESCRIPTION OF EQUIPMENT OR OPERATION	DATE	STUDENTS' SIGNATURE	INSTRUCTORS' INITIALS
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