

Hawaii Work-Based Learning Program

WORK SITE CHECKLIST

Directions: *Qualified school safety surveyors must do a walk-through of potential work sites in order to ascertain the proper work experience for the student participating in a work-based experience. All students must be placed in a safe environment. This checklist shall be used as a guide for determining safe environments.*

Business: _____

Work-site Contact Person: _____

Address: _____ Phone: _____

_____ Fax: _____

Date of Visit: _____ e-mail: _____

Safety Surveyor: Circle the appropriate letter for each statement.

S Satisfactory (needs no attention)

U Unsatisfactory (needs attention)

NA Not applicable

1. ADMINISTRATIVE REQUIREMENTS **S U NA**

- Injury and Illness Record up-to-date
- Safety poster is posted
- First aid kit is available

Comments:

2. GENERAL PHYSICAL CONDITION OF WORK-SITE **S U NA**

- Floors, walls, illumination, ventilation, etc.

Comments:

3. HOUSEKEEPING **S U NA**

- Work materials stored properly
- Tools and equipment kept orderly
- Aisles and work areas neat and clean, etc.

Comments:

Appendix II (cont.)

4. EQUIPMENT

S U NA

- Work-site follows safety procedures for properly maintaining, storing, and using equipment

Comments:

5. FIRE PROTECTION

S U NA

Work-site follows safety procedures for fires, i.e.,

- Fire extinguishers are visible, up-to-date, and adequate
- Exits are properly marked, are clear, and adequate
- Evacuation plan is posted

Comments:

ADDITIONAL REMARKS OR CONCERNS:

APPROVED AS A SAFE WORK ENVIRONMENT FOR THE PLACEMENT OF STUDENTS:

Yes _____ **No** _____

Disclaimer: *This survey was conducted with the understanding that it applies to the date and time on which it occurred. In no way does the survey or any approval of the work-site as being a safe environment have any applicability to any other program than the one stipulated by Act 242, SLH 2001, Hawaii Revised Statutes.*

Report submitted by: Print Name _____

Signature _____

Title _____ Date _____ Time: _____