

Safe System of Work

OPERATING AND SAFETY INSTRUCTION FOR MILLING

Name: Training Date:.....

	Instruction	Understood ✓ or X
1	Explained what safety equipment is required to use this	
2	Explained why safety equipment is to be used on this machine	
3	Explained why loose clothing or ties are not to be worn	
4	Shown where and how to use main machined isolator	
5	Shown where and how to turn the machine on and off	
6	Shown how the tools are inserted using the air drawbar	
7	Explained where NOT to put hands/fingers etc.	
8	Shown how to change speeds and direction when it would be required	
9	Shown how to change feeds and feed direction	
10	Explained how to insert tools and drill bits into the holders	
11	Explained how the vice, chuck and fixtures need clocking and why	
12	Explained how not to use your hands to stop tool chucks	
13	Explained how not to clean or grab hold of the swarf especially while the machine is still running	
14	Make sure all guards are in place	
15	Make sure all items being machined are fixed down correctly	
16	Reiterated the importance of wearing goggles	
17	Reiterated the importance of wearing gloves when handling swarf	
18	Explained how the machine must be cleaned down after use	
19	Explained how the machine bed is to be oiled and how the oil feed oiler works	
20	Explained how the CNC table will move and to keep area free of obstructions	
21	Explained how CNC controller works and risks associated with it i.e. offsets and co-ordinates.	

I have received the above training and fully understand every point that was explained to me. I confirm that I will wear the required PPE equipment when using the above machinery and take all steps to ensure my own safety. I will ask for further training if I need to and will immediately inform the Supervisor or Manager if there are any issues with the machinery.

Name:

Signed: Date:.....

I confirm that I have trained the aforementioned person and that they fully understand how to use the above machinery, have received the required PPE equipment and know to inform me immediately of any issues with the machinery or if they require further training. I authorise this person to use the machinery detailed above.

Name:(Authorised Trainer)

Signed Date: