

**Safe System of Work**  
**OPERATING AND SAFETY INSTRUCTIONS FOR ALL CHOP SAWS**

Name: ..... Training Date:.....

	<b>Instruction</b>	<b>Understood ✓ or X</b>
1	Explained that safety equipment must be used at all times and why – goggles, ear protection and dust extraction must be provided and used.	
2	Explained why loose clothing or ties are not to be worn.	
3	Shown where and how to use main machine isolator switch.	
4	Shown where and how to use on/off switch.	
5	Shown how the cutting blade rotates.	
6	Shown where <b>not</b> to put hands/fingers etc.	
7	Explained about turning the saw off before un clamping work.	
8	Explained about the blade guard and how it works.	
9	Explained why we need a blade guard.	
10	Shown how to safely remove work from saw.	
11	Explained that the blade is only to be changed once the operator has had further specific training.	

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: .....