



Breakroom Safety Meetings

Topic M8: Ladder Safety



Employee Quiz:

- Never stand or work from the top _____ steps of a step ladder.
(A) 1 (B) 2 (C) 3 (D) 4
- Name two types of ladders used around the workplace _____ and _____
(A) extrusion, step (D) jointed, unsafe
- _____ involved when using ladders.
(A) Dropping (B) Climbing (C) Slipping (D) Weather conditions
- Always inspect _____ use.
(A) during (B) after (C) before (D) for internal
- Rungs or steps on a metal ladder must be treated to prevent _____.
(A) grinding (B) erosion (C) disease (D) slipping
- Never carry loads up or down ladders which could cause you to _____.
(A) forget what you're doing (B) lose your balance (C) look silly (D) strain yourself

EMPLOYEE QUIZ demonstrates your employee's understanding of material

Employee Workplace Inspection: Initial in the space provided at each point, or write N/A if not applicable to your job.

- _____ I have sustained no workplace injuries as of this date.
- _____ I am aware of the possession of, or being under the influence of alcoholic beverages or illegal drugs on company property or in company vehicles, is expressly prohibited under company policy and violation of this policy will be grounds for immediate termination of employment.
- _____ I have been informed that the use of company property, supplies, or product from company property without permission is prohibited and may result in disciplinary action.
- _____ I will immediately notify my supervisor of any safety concerns in the workplace.
- _____ I have been informed that any harassment initiated by me will be reported to my supervisor and that disciplinary action including termination may result.
- _____ I have been informed that any weapons are prohibited, and agree to never bring any weapons on company property, including company vehicles.
- _____ I am trained and properly licensed to operate any company vehicle which has been assigned to me, and agree to notify management if my license is suspended or revoked for any reason. I will report any incidents which involve the vehicle I am operating to my supervisor.
- _____ I have been issued, and have inspected, all necessary personal protective equipment for my job. I have found the equipment free of defects, and agree to wear all appropriate personal protective equipment.
- _____ I have inspected all machine guards to ensure they are in place and secure. I agree never to remove, disable, or modify any safety guards, and to notify my supervisor immediately of any missing or broken guards.
- _____ I have been informed of where material safety data sheets are stored, and have free access to them.
- _____ All flammable or combustible materials have been stored or disposed of properly.
- _____ I have been trained in requirements for handling/storing/disposing of any chemicals I might have contact with in the workplace.
- _____ My work area is clean and free of clutter.
- _____ I have been notified of emergency evacuation procedures, the location of fire extinguishers, and the location of fire exits.
- _____ All equipment and tools have been inspected and any defects have been reported or corrected.
- _____ I have inspected my workplace for safety hazards.
- _____ I have been informed of all safety policies and regulations.
- _____ I am aware of and trained in all necessary lockout/tagout procedures to perform my job safely.
- _____ I have been trained in safe material handling techniques, and agree to proper lifting/team lifting techniques for materials in my workplace.
- _____ I have been properly trained and/or certified and/or licensed to perform my assigned work competently and safely.
- _____ I have been fully informed of, and agree to abide by, all company policies, rules, and regulations.

Each sentence covers essential Safety documentation

Employee's signature verifies knowledge of workplace Safety

I understand that by signing this form I attest and verify that the above information is true and correct, and that failure to follow company safety policies may result in disciplinary action.



Employee Signature: _____ Date: _____

Foreman/Supervisor's Signature: _____ Date: _____



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