



Fermilab Tech Shop Operator Evaluation Form (FN000258/EV/00)

<b>Operator Name</b>	<b>ID No.</b>	<b>Evaluator Name</b>			<b>ID No.</b>
<b>Date of Evaluation</b>	<b>Tech Shop(s) used</b>				
<b>Operator Requirements</b>	<b>Pass</b>	<b>Fail</b>	<b>N/A</b>	<b>Comments</b>	
<b>Pre-use Check (Machine Check, Guards, Cord, Operation)</b>					
1. Visually check machine for defects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2. Check for guard placement and operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3. Visually inspect cord for frays, separation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4. Verify placement of emergency stop (if equipped)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5. Turn on machine and listen for abnormality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Operation and use of Tech Shop Machine(s)</b>	<b>Safety</b>		<b>Quality</b>		
<b>A = Adequate N/I = Needs Improvement/OJT</b>	<b>A</b>	<b>N/I</b>	<b>A</b>	<b>N/I</b>	
1. Disc/Belt Sander	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Corner Notcher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Drill Press	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Finger Brake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Pedestal Grinder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Slip Roll/Metal Roll	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Shear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Rotex Punch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Pistorius Saw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Shot Blast Cabinet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Vertical Band Saw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Horizontal Band Saw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Operator Requirement</b>	<b>Pass</b>	<b>Fail</b>	<b>N/A</b>	<b>Comments</b>	
1. Operator ensured guarding in place and maintained position during operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2. Operator used a tool when work piece close to operating edge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3. Operator wore proper PPE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4. Operator turned off machine prior to removing work piece	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Shop clean-up</b>					
1. Machine turned off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2. Chips and debris swept from machine, floor cleaned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Based on my evaluation, the operator has **successfully** completed the evaluation and is qualified to operate the equipment (all evaluations are "Pass/Adequate")

Based on my evaluation, the operator **requires more training** and must go through OJT with his supervisor and re-evaluated (valid if any of the "Fail" boxes are checked).

Cont'd on next page: signatures required.

*Disclaimer: The classroom portion of this course is to evaluate the safe operation of machines and behavior in a tech shop setting. This course **does not** authorize you to operate in any tech shop and use any equipment within. You are responsible for obtaining permission to operate within a tech shop and on the machines within that tech shop via the Tech Shop Point of Contact.*

**Evaluator Signature**

**Operator Signature**

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**Data Management**

Date entered \_\_\_\_\_

Class Code \_\_\_\_\_

Signature \_\_\_\_\_