

Name: _____

Student ID _____

Information and Training Log

	Initial Training			Additional Training			Additional Training			Additional Training		
	Student Initials	Date	Instructor Initials	Student Initials	Date	Instructor Initials	Student Initials	Date	Instructor Initials	Student Initials	Date	Instructor Initials
Stationary Power Tools												
Radial Arm Saw												
Sliding Compound Mitre Saw												
Table Saw												
Band Saw												
Drill Press												
Dry Cut Metal Chop Saw												

Portable Power Tools												
Jig Saw												
Circular Saw												
Router												
Drill/ Driver												

Pneumatic Tools												
Finish Nailer												
Narrow Crown Stapler												
Medium Crown Stapler												
Framing Nailer												
Palm Nailer												
Impact Wrench												

General Hand Tools												
Paint Frame												

Training Seminars												
Shop Orientation												
MSDS												
PPE												
Emergency Response												
Employee Handbook												

By initialling above and signing below, I agree that:

- 1). I have been instructed in the proper use and operation of the listed tools and machines.
- 2). I feel comfortable using the listed tools for the purposes of theatrical production and fabrication.
- 3). I will ask for assistance when asked to participate in a manner in which I am not comfortable.
- 4). I will not attempt to use any of the above tools while alone or without proper supervision.
- 5). I will only operate tools in which I have been trained.

Signature

Date

Signature

Date

Signature

Date

Signature

Date