|  |  |  |  |
| --- | --- | --- | --- |
| Department: | Date: | Location: | Job Title: |
| Job Performed by: | Analysis by: | Page of  |
| Supervisor: | Approved by: |  |
|  **Work Process** **What are we doing today?** |  **Potential for Hazards/Injury Sources****How can we get hurt?****How can we get hurt?** |  **Safe Action of Procedure (PPE)** **What can we do to prevent injury or illness?** |
|  |  |  |

Hazard Selection for the middle column: SB= Struck By, SA = Struck Against, CBY = Contacted By, CI = Caught in, CB = Caught Between, CO = Caught On, FB = Fall to Below, EH=Electrical Hazard, C=Cuts, CW = Contacted With, O = Overexertion or Repetitive Motion, BR = Bodily reaction E = Exposure to Chemical, Noise etc.