HINDS SAFETY	**Tool Box Talk / Sign In & Out** **Hinds Safety Form**	Doc. #:	HS-14-F-006
		Issue Date:	05-Mar-2018
		Rev. Date:	30-Mar-2019
		Rev.#	01

Project:		**Supervisor:**		**Date:**	

Tool Box Talk Minutes

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Concerns brought up	Action

Pre-Shift Sign In					Post Shift Sign Out	
Name	Trade or Position	Signature	Are you fit to work?	Time In	Did you receive an injury today?	Time Out
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
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			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	
			□ YES □ NO		□ YES □ NO	

Supervisor Sign Off: ***All of the above listed workers are out of the work area and accounted for.***

Supervisor Signature:		**Time:**	