



**Calgary, Alberta**  
 #113, 3825-34 Street NE  
 T1Y 6Z8  
 Phone: (403) 301-0260  
 Fax: (403)291-0854

**Edmonton**  
 #200-8749 53<sup>th</sup>Ave  
 T6E 5E9  
 Phone: 780-454-9800  
 Fax: 780-454-1490

## JOB SITE EVALUATION FORM

A Helping Hand is committed to a health and safety management system aimed at protecting our employees, our property, other workers, and the general public from accidental losses.

It is a policy of A Helping Hand that our employees are not to perform tasks they are not trained to perform.

If your job site should change, then we require that another job site evaluation be completed. (General Labour)

If your company is unable to train or orientate our employees, then we require that you send us the required information so we can provide suitable training and orientation in specific tasks and safety before we send AHH employees out.

<b>Customer Name :</b>		<b>Contact Person :</b>	
<b>Job Site Address :</b>		<b>Phone :</b>	
		<b>Fax :</b>	
<b>Job Description : Please state tasks required by AHH employees</b>			
<b>PPE REQUIRED FOR A HELPING HAND EMPLOYEE ON THIS JOB</b>			
			Comments
Safety Glasses / Goggles	Yes	No	
Safety Shoes / Boots	Yes	No	
Dust Masks / Respirators	Yes	No	
Safety Vests	Yes	No	
Hearing Protection	Yes	No	
Gloves ( Labour / Health care )	Yes	No	
Hard Hats	Yes	No	
Special PPE (please note)	Yes	No	
Is fall protection equipment used?	Yes	No	



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PLEASE ANSWER THE FOLLOWING QUESTIONS			
			Comments
Will you provide task specific training required by an AHH employee?	Yes	No	
Will you relay potential hazards pertaining to your workplace / site to AHH employees?	Yes	No	
Are AHH employees exposed to hazardous materials?	Yes	No	
Will you supervise AHH employees to ensure they are wearing the appropriate PPE?	Yes	No	
Will AHH employees be advised of your current safety program? (Please comment if you do not have a safety program)	Yes	No	
Is First Aid services available to AHH employees?	Yes	No	
Will you advise AHH if an AHH employee receives First Aid treatment?	Yes	No	
Will you provide orientation to AHH employees?	Yes	No	
Will you advise AHH if there are any incidents or near misses?	Yes	No	
Safety Person or Supervisor Contact Name and ext :			

- Ø We require that your company provide us with the documentation to train and orientate our employees of the necessary information pertaining to your company before we send AHH employees to work. **(if you are unable to do so)**
- Ø Please fax or mail us a copy of Tool Box Meetings / Training provided / Hazard Assessments on duties performed by AHH employees.

Our goal is to have a healthy, accident-free workplace for all of our employees. By working together, we can achieve this goal.

A Helping Hand Representative	Site Supervisors Signature	Management Approval
Date	Date	Date