

VOC (TABLE SAW)

SS-WHS-SAF-000

Authorised By:

Rev 1 [Publish Date]



TRAINEE NAME	
ASSESSOR NAME	
TOOL TYPE	Table Saw
TOOL MAKE / MODEL	
DATE OF ASSESSMENT	

KNOWLEDGE ASSESSMENT (TO BE COMPLETED BY TRAINEE)

QUESTION	C / NYC
1. List at least 3 things that you would inspect as part of a pre-start check.	
2. List at least 2 issues that that could impact the safety of the machine (e.g. overly worn components).	
3. What should you do if you identify significant defects or issues during your pre-start check?	
4. What should you do if you find the tool has no current electrical test and tag (240v tools only)?	

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5. List at least 2 safety features on this machine and their function.	
6. List 3 hazards that may exist during operation of this machine. For each hazard, list a control measure to manage that hazard.	
7. List any PPE requirements that may exist for this machine.	
8. List an emergency situation that could occur during operation of this machine and include how you would respond to this situation.	
9. List any operator maintenance required for this machine (e.g. changing blades).	

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PRACTICAL ASSESSMENT (TO BE COMPLETED BY ASSESSOR)	
TASK / OBSERVATION (TRAINEE MUST SUCCESSFULLY DEMONSTRATE THE FOLLOWING)	C / NYC
PREPARING FOR OPERATION	
The trainee determined job requirements from the work order and cutting pattern, seeking clarification from appropriate personnel if necessary.	
The trainee confirmed workplace health and safety procedures, including the use of personal protective equipment, equipment lock-out, and safe manual handling techniques.	
The trainee identified and assessed hazards, taking actions to mitigate risks related to operating a table saw.	
The trainee identified workplace environmental protection practices and/or procedures for minimizing and disposing of waste material, cleaning tools and equipment, and maximizing energy efficiency.	
The trainee checked input product to ensure the supply and quality met specifications.	
OPERATING THE MACHINE	
The trainee followed machine lock-out procedures and adjusted saws, carriage, speeds, and feeds to suit the type of material, dimensions, and cutting sequence.	
The trainee used the table saw according to manufacturer instructions and workplace health and safety and environmental protection practices and/or procedures.	
The trainee selected and followed the cutting sequence to produce the required quantity.	
The trainee maintained a feed rate appropriate to the condition and size of the product.	
The trainee cleared the work area according to workplace health and safety procedures.	
The trainee disposed of incorrect cuts, off-cuts, and defective products according to workplace environmental protection practices and/or procedures.	
The trainee stacked material safely in the designated location according to workplace procedures.	
SAWING CONDITIONS ASSESSED AND OPTIMUM SAWING PROCESSES MAINTAINED	
The trainee assessed sawing conditions regularly to determine the optimal feed rate and finish.	
The trainee adjusted the sawing feed rate to achieve finished dimensions according to the work order.	
The trainee evaluated the finished product regularly and adjusted the sawing process to maximize product quality.	
The trainee regularly measured dimensions of the finished product against standard sizes and tolerances and adjusted the sawing process accordingly.	
The trainee identified routine processing and equipment faults, resolving or reporting them to appropriate personnel.	

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The trainee completed production and quality records, reporting them according to workplace procedures.	
COMPLETED OPERATOR MAINTENANCE	
The trainee locked out machine and equipment according to workplace health and safety procedures.	
The trainee checked saw blades for bluntness or damage.	
The trainee removed and replaced blades according to manufacturer recommendations.	
The trainee disposed of used blades according to workplace environmental protection practices and/or procedures.	
The trainee completed basic non-specialist maintenance of equipment.	
The trainee recorded and reported equipment faults and maintenance requirements to appropriate personnel.	
ASSESSMENT RESULT	C / NYC

ASSESSOR NAME AND SIGN	
TRAINEE NAME AND SIGN	