Checklist of E/OHS Activities for Welding and Brazing Safety

Program Contact Person(s) Eddy Jaskowiak

Department Contact:

- Metals Shop/Ag. FFA _____
- Art Kristine Sellner
- Custodial Eddy Jasowiak

Is the Welding and Brazing Plan in place? *Yes* *No*

Is the Plan current? *Yes* *No*

Has the Plan been reviewed this school year? *Yes* *No*

Method or methods used to control airborne particulate matter? External negative air and internal filters

Has training been conducted for affected personnel? *Yes* *No*

Type of welding equipment available

- Electric arch……. Yes No N/A
- Wire feed/TIG MIG……. Yes No N/A
- Electric spot weld…… Yes No N/A

Personal Protective Equipment: availability and condition

- Gloves…… Yes No N/A
- Goggles…… Yes No N/A
- Welding mask…… Yes No N/A
- Apron…… Yes No N/A
- Steel toed shoes…… Yes No N/A

Describe location of welding activities, example; out-of-doors, booth, floor, all of the above:

Welding can be conducted indoors or out. The air filter is adequate to handle a significant particle load.

Program is currently not being taught and equipment is being stored SC 10/02/2018