



**New Task Training Form Report**  
**30 CFR Part 46**

**Task:** Work Place Examination of \_\_\_\_\_

Mine:	<b>11-01228</b>	<b>47-03434</b>	<b>11-03221</b>
	<b>Antioch</b>	<b>Lange</b>	<b>Petersen</b>

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**Work Place Inspection Task Training**

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**\*\*Inspection of designated work place area\*\***

\_\_\_ The designated company trainer will train the trainee in how to properly identify safety hazards in a given work area and how to report them when a safety hazard has been identified.

- Understand how to fill out the calendar
- How to report hazards
- Understand the check list of things to look for but not limited too
- Proper Lock-out/Tag-out procedures
- Understands the work place area to be inspected, and can easily describe the affected area
- Can properly identify safety hazards

\_\_\_ The designated company trainer will continue to do this until he/she feels that the trainee fully understands the proper company procedures.

<b>Trainee:</b> _____	_____	<b>Date of Completion:</b> _____
(Printed Name)	(Signature)	

<b>Trainer:</b> _____	_____	<b>Date of Completion:</b> _____
(Printed Name)	(Signature)	

**Duration of Time for Training:** \_\_\_\_\_

**Trainee** (Signature): \_\_\_\_\_

(I certify that the above training has been completed)

<b>Safety Manager</b> (Signature): _____	_____
(Signature of person responsible for Health and Safety Training)	(Print Name)

**\*\*False certification is punishable under section 110(a) and (f) of the Federal Mine Safety and Health Act\*\***