Skills Canada – Ontario

Hazard Identification Checklist
Job Skills Demonstration

QUESTIONS TO CONSIDER IN YOUR EVENT

When planning your demonstration it is important that aspects of health and safety be considered in order to ensure a successful competition. Please take time to complete the following and submit at orientation.

Name of Competitor	
Skill to be Demonstrated	

FIRES

Will there be potential for fires? ☐ Yes ☐ No
If YES, please explain.

_____

_____

Will there be ways to minimize the risk? ☐ Yes ☐ No
If YES, please explain.

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_____

Will there be flammable substances used in your competition? ☐ Yes ☐ No
If YES, please explain.

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Will flammable substances be adequately controlled? ☐ Yes ☐ No

Are you planning to carry out hotwork, i.e. welding, grinding etc. in your demonstration?

☐ Yes ☐ No

If YES, please explain.

_____

_____

SLIPS & TRIPS

Does the planned layout of the work area for the demonstration include reducing the potential for slips and trips?

☐ Yes ☐ No

Are there arrangements for cleaning up spillages? ☐ Yes ☐ No

Will the competitor be wearing suitable footwear? ☐ Yes ☐ No

PERSONAL PROTECTIVE EQUIPMENT

Will any activities being undertaken require competitors and judges to wear any protective equipment?

☐ Yes ☐ No

If YES, will there be an adequate supply of protective equipment available? ☐ Yes ☐ No

Will the personal protective equipment be suitable for competitors and judges (i.e. size, degree of protection)?

☐ Yes ☐ No

MANUAL HANDLING

Will manual handling tasks associated with the demonstration be adequately controlled and within the capabilities of the competitor? ☐ Yes ☐ No

HAZARDOUS SUBSTANCES

Have all hazardous substances within the competition been identified? ☐ Yes ☐ No

Will suitable control measures be in place for the hazardous substances and proper handling of them?

☐ Yes ☐ No

Will there be suitable storage and disposal arrangements for the hazardous substances?

☐ Yes ☐ No

OTHER

Will your demonstration include the following:

Electrical equipment and/or power supply?	☐ Yes	☐ No
Overhead hazards?	☐ Yes	☐ No
Airborne contaminates? (i.e. dust, molds, vapours, fumes etc.)	☐ Yes	☐ No

If you answered YES to any of the above, please explain what is planned to eliminate or reduce the risk.

_____

_____

_____

_____

What other health and sanitation guidelines need to be followed for your demonstration?

_____

_____

_____

_____

As a teacher/mentor of this competitor, I verify that the information provided in this demonstration's safety plan encompasses the required safety precautions for the competitor and spectators of the demonstration.

Teacher/Mentor Name: _____

Signature: _____

Please submit this form at the competition orientation to avoid a penalty.