JOB HAZARD ANALYSIS FORM

JOB TASK:		DATE:
TITLE OF PERSON WHO DOES JOB:	SUPERVISOR:	ANALYSIS BY:
DEPARTMENT:	SECTION:	REVIEWED BY:
REQUIRED AND/OR RECOMMENDED PERSONAL PROTECTIVE EQUIPMENT:		APPROVED BY:

SEQUENCE OF BASIC JOB STEPS *Beware of being too detailed, record only the information needed to describe each job action. Rule of thumb, no more than 10 steps/task being evaluated*	POTENTIAL ACCIDENTS OR HAZARDS *HAZARD CLASSIFICATION CATEGORIES: Stuck By/Against, Caught In/Between, Slip, Trip, or Fall, Overexertion, Ergonomic (Awkward Postures, Excessive Force, Vibration, Repetitive Motion)*	RECOMMENDED SAFE JOB PROCEDURE *HAZARD CONTROL CATEGORIES: Engineer Out (New Way to Do, Change Physical Conditions or Work Procedures, Adjust/Modify/Replace Work Station Components/Tools, Decrease Performance Frequency), Personal Protective Equipment (PPE), Training, Improve Housekeeping*