



PRE-PLACEMENT/FIELD TRIP DUE DILIGENCE CHECKLIST

This checklist may be used to identify unsafe exposures in facilities/locations where students may be required to work, study or perform research activities and also to document safety measures in place to protect students from exposure.

| Organization Name: | | | |
|------------------------------------|---|------------------|---|
| Equipment | | Y/N or N/A | If yes, please specify what protective measures are in place. |
| Hand tools and equipment | Will the student be working with hand tools or equipment? (e.g. hammer, screwdriver, blades) | | |
| Portable power tools and equipment | Will the student be working with portable power tools or equipment? If yes, has hearing protection been provided? (e.g. drill, jig saw, rotary tools) | | |
| Mobile equipment | Will the student be working with or near mobile equipment? If the student will be utilizing mobile equipment, will training be required and/or provided? (e.g. forklift, pallet truck) | | |
| Stationary power machines | Will the student be operating stationary power machines? (e.g. drill press, band saw, table saw) | | |
| Electrical | Will the student be exposed to any electrical hazards in the workplace? (e.g. electrical panels, lighting, electrical wiring) | | |
| Compression | Will the student be working with anything under compression, such as compressed gases or gas cylinders? | | |
| Pressure systems | Will the student be working in proximity to pressure pipes or steam boilers? | | |
| Human Factors | | Y/N or N/A | If yes, please specify what protective measures are in place |
| Harassment | Is there a policy on harassment that will be provided to the student? | | |
| Violence | Is there a policy on workplace violence that will be provided to the student? | | |
| | Has the risk of workplace violence been assessed as required by the OHS (s. 32.0.3)? | | |
| | Are there situations where the student could be exposed to violence? Could the student become a subject of violence? | | |
| Working alone | Will the student be working alone? (e.g. working alone in an office or building) | | |
| Shift work | Will the student be working shifts? (e.g. working an irregular work schedule) | | |
| Computer Use | Will the student be working at a computer for the majority of a typical work day? | | |
| Work stress | Will there be a high level of stress in the student's work? (e.g. work requiring constant alertness for long periods of time, such as a security monitor, or work with high levels of emotional | | |

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| | stress such as working in an Emergency Room) | | |
| Musculoskeletal Disorders (e.g. Lifting, Repetitive Actions) | Will the student be using the same muscles over and over again or for a long time without taking time to rest, exerting high amounts of force and/or required to work in an awkward posture? | | |
| General Housekeeping | Will the student work in uncluttered workspace with minimal distractions? (e.g. tidy work area) | | |
| Entrances, exits and stairways | Will the student encounter passageways, entrances, exits (especially fire) or stairways that are not clearly marked or clear of obstructions? | | |
| Working at Heights | Is the student going to be working at elevation that they may be susceptible to falling from? If so, is adequate fall protection equipment provided/required? | | |
| Chemical substances | Will the student use or be exposed to flammable, corrosive, toxic or reactive chemicals? (e.g. acetone, nitric acid, toluene, mineral spirits) | | |
| Biological substances | Will the student have contact with any harmful microorganisms? | | |
| Radiation | Will the student be exposed to harmful radiation? (e.g. x-rays, lasers) | | |
| Restricted spaces | Will the student be in proximity to or working in restricted space, trenches or confined spaces? (e.g. man hole, silo) | | |
| Hot materials or surfaces | Will the student have contact with hot materials or surfaces? (e.g. stove, soldering iron, torch, forging materials, welding materials) | | |
| Ultraviolet light (Sunlight) | Will the student spend any time working in the sun? If so, for what duration? | | |
| Temperature | Will the student work in very cold or hot conditions? (e.g. outdoors, kilns, refrigerated areas) | | |
| Noise | Will the student be exposed to excessive noise in the work environment of 85 decibels or greater? | | |
| Air quality | Will the student be exposed to excessive dust, fumes or gases? (e.g. welding fumes, carbon monoxide) | | |
| Other (attach additional sheet if necessary) | | | |

Completed by:

Signature:

Date: