SSD-007

TOOLBOX TALK RECORD

Focus the crew. Discuss today's hazards. Confirm controls and understanding before work continues.

2 Company Information		**Toolbox Talk Record No.**	
4 Jobsite Location		**3 Date and Time**	
Company / Employer		**5 Supervisor/Presenter**	Time: _____ Shift: _____
6 Toolbox Talk Topic		**7 OSHA Reference**	
Project Name / No.		**14 Supervisor Certification**	

1 Project Information *Complete before presenting the toolbox talk.*

8 Hazards Discussed	9 Required Controls
☐ Work-area hazards and changing conditions	☐ Elimination / substitution reviewed
☐ Line-of-fire / struck-by / caught-between	☐ Engineering controls in place
☐ Falls / access / elevation exposure	☐ Procedures / permits / planning reviewed
☐ Electrical / energy / equipment hazards	☐ Barricades / access control established
☐ Weather / environmental exposure	☐ Qualified persons / spotters assigned
☐ Other: _____	☐ Stop-work expectations reinforced
	☐ Corrective actions assigned
	☐ Other: _____

6 Toolbox Talk Topic | 7 OSHA Reference *Identify the topic, applicable requirements, and key learning objective.*

DISCUSSION	8 Hazards Discussed	9 Required Controls	10 PPE Requirements	11 Demonstration/Hands-On Training	12 Employee Questions and Discussion
DISCUSSION	Topic / Task	OSHA Reference	Presenter Notes	Crew Feedback	Follow-Up Needed

Discussion status: C - COVERED Q - QUESTIONS N/A - NOT APPLICABLE F/U - FOLLOW-UP

Presenter response: Explain requirements in language attendees understand. Encourage questions, demonstrate controls when appropriate, document follow-up items, and stop affected work when required safeguards or qualifications are incomplete.

12 Employee Questions and Discussion | 13 Corrective Actions

Record questions, responses, commitments, and required follow-up.

#	QUESTION / DISCUSSION ITEM	HAZARD / QUESTION / OBSERVATION	RESPONSE / CONTROL / CORRECTIVE ACTION	STATUS	DUE	OWNER / PRESENTER
1				C / Q / N/A / F/U	C / Q / N/A / F/U	
2				C / Q / N/A / F/U	C / Q / N/A / F/U	
3				C / Q / N/A / F/U	C / Q / N/A / F/U	
4				C / Q / N/A / F/U	C / Q / N/A / F/U	
5				C / Q / N/A / F/U	C / Q / N/A / F/U	
6				C / Q / N/A / F/U	C / Q / N/A / F/U	
7				C / Q / N/A / F/U	C / Q / N/A / F/U	

Status Key: C = Covered Q = Question N/A = Not Applicable F/U = Follow-Up

Toolbox-talk reminder: Keep the discussion relevant to current work, invite employee participation, demonstrate critical controls when useful, and assign unresolved hazards or training needs to an owner and due date.

8–11 Discussion and Demonstration Details

10 PPE Requirements	11 Demonstration/Hands-On Training
☐ Head / eye / face protection ☐ Hearing / respiratory protection ☐ Hand / foot / high-visibility PPE Special PPE: _____ Inspection / fit / limitations reviewed PPE questions: _____ Replacement needed: _____ Understanding confirmed by: _____ Status: ☐ C ☐ Q ☐ N/A ☐ F/U Notes: _____ Presenter initials: _____ Date: _____ ☐ Other: _____	☐ Safe-work method demonstrated ☐ Employee practiced required control ☐ Equipment / PPE inspection demonstrated ☐ Emergency / rescue step reviewed ☐ Hands-on questions answered ☐ Additional coaching required ☐ Demonstration not applicable Understanding confirmed by: _____ Status: ☐ C ☐ Q ☐ N/A ☐ F/U Notes: _____ Presenter initials: _____ Date: _____ ☐ Other: _____

14 Supervisor Certification

5 Supervisor/Presenter		**Toolbox Talk Location**	
Employee Questions Resolved?		**Crew / Trade**	
Follow-Up Training Required?	☐ No ☐ Yes - topics: _____	**Language / Interpreter Needed?**	☐ No ☐ Yes - details: _____
Presenter Notes / Work Restrictions		**Talk Date / Time**	Date: _____ Time: _____

Management Review (if required)

☐ Topic and objective reviewed	☐ Hazards discussed	☐ Required controls confirmed	☐ PPE requirements confirmed
☐ Demonstration completed / N/A	☐ Questions and discussion completed	☐ Corrective actions assigned	☐ Other: _____

15 Attendee Sign-In Table

Before closing the talk, confirm attendees understand the hazards, required controls, PPE, emergency expectations, and reporting

responsibilities; allow time for questions and hands-on demonstration; assign corrective actions; and restrict affected work until critical controls, required training, or qualifications are in place.

Corrective Action No.		**Date / Time**	
Corrective Action / Follow-Up Requirement		**Completed / Verified By**	

15 Attendee Sign-In Table *Signatures document attendance and do not waive employee rights.*

CERTIFICATION	PRINTED NAME	SIGNATURE	DATE / TIME
15 Attendee Sign-In Table			
14 Supervisor Certification			
Management Review (if required)			
Additional Approval (if required)			

13 Corrective Actions: Assign an owner and verify completion.

Use one line per corrective action or follow-up item. The supervisor records the owner and due date; the verifier confirms completion before affected work proceeds without required controls or supervision.

PRINTED NAME	SIGNATURE	COMPANY	TIME IN

14 Supervisor Certification | 16 Record Retention

15 Attendee Sign-In Table	☐ Attendance recorded ☐ Questions addressed	Date / Time	
14 Supervisor Certification	☐ Talk delivered ☐ Controls verified	Supervisor Comments / Restrictions	
16 Record Retention Location / Period		Record Filed / Retained By	

IMPORTANT: This record documents a toolbox talk but does not replace required task-specific training, licenses, certifications, competent-person instruction, manufacturer requirements, site rules, or regulatory training. The employer remains responsible for qualified presenters, employee comprehension, authorization, supervision, corrective action, and secure record retention.