## **Pre-work Briefing**



Work Location:		Briefing Date: dd:mm:yy	
Scope of work:	Site Supervisor:	Phone:	
Emergency assembly point:	Briefer:	Briefer's signature:	
First aid kit location:	First Aider:	SWMS/SWI Ref #:	
Hazards (eg. Site specific hazards identified, including physical	Controls (to be implemented to eliminate or reduce the risk to the	Responsible for Control (either	
environment, human errors, plant and equipment)	lowest practicable level)	Sydney Trains or name of Contractor)	

Custodian: Safety Specialist Approved by: Group Manager, Safety & Accreditation Number: SMS-06-FM-4163

Issue Date: 23/09/2015

## **Pre-work Briefing** cont.



Participant Acknowledgement										
All incidents and injuries must be reported to the site supervisor (Line Manager) and the Safety Incident and Injury Hotline on 1800 772 779										
Briefer to tick each item below that is applicable and rule a line through those that are not.  All persons listed below acknowledge that they:  NOTE: Persons are to question the Briefer if they don't understand any part of this briefing that are not.										
<ul> <li>have been inducted to the site</li> <li>hold the applicable and current certificates of competency, trade licence and/or induction record eg. Construction Industry Induction</li> <li>wear the appropriate Personal Protective Equipment (PPE)</li> <li>have been informed of the requirements of the electrical permit (if required)</li> <li>have been briefed on the SWMS/SWIs/documented safe work practice for the job</li> <li>have been instructed in the controls recorded in this document and SWMS/SWIs</li> </ul>			are free from the effects of alcohol/drugs/fatigue have been made aware of any hazardous materials/substances on site have been briefed on Safety Data Sheets (SDS) have been briefed on the site specific safety management plan have been briefed on the hazards of adjoining worksites/processes have been briefed on the results of today's site walk inspection and any new hazards identified and their controls as a result of this inspection							
Name	Signature	Time of briefing: hh:mm	Amendment briefing: hh:mm & Initial	Name	Signature	Time of briefing: hh:mm	Amendment briefing: hh:mm & Initial			

Custodian: Safety Specialist Approved by: Group Manager, Safety and Accreditation Number: SMS-06-FM-4163

Issue Date: 18/09/2015