

# S.O.G. 105

## Basic Safety

### Instructors Guide

This class is to insure that every employee understands the importance of safety on the job for themselves, others and University property.

1. Have every employee watch the safety video (Job safety for the professional Landscape employee.
2. Give them a copy of the handout to study.
3. Make sure they understand which P.P.E. is mandatory.
4. Have the employee take the quiz on the safety video and sign.
5. Have the employee take the quiz on the hand out sheet and sign.
6. Log the results of the quizzes on the progress chart and have the employee sign.
7. Place the completed quizzes one and two in the employees file in the front office.

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S.O.G. #105  
Basic Safety  
Handout

1. Always wear your PPE (personal protective equipment) when on the job. Use the right PPE for the job.
2. Safety glasses are mandatory and must be worn at all times when working out in the field.
3. Always wear a safety vest and place safety cones out when working in or around traffic.
4. Apply sunscreen daily.
5. Wear a hat, cap or visor when working outside to protect your skin against sun damage.
6. Wear earplugs and dust mask when appropriate.
7. Stay hydrated, drink plenty of fluids (water) and watch out for your co-workers for signs of dehydration.
8. Be aware of your surroundings, watch out for others in the area.
9. Avoid distractions, focus on your job.
10. Be able to identify and avoid Poison Ivy.

Pass \_\_\_\_\_  
Fail \_\_\_\_\_

S.O.G. 105  
Basic Safety  
Quiz

1. One of the most important things you can do to protect yourself against on the job hazards is to use personal protective equipment. T or F
2. You will probably use the same PPE no matter what your job is. T or F
3. You should drink extra water or other fluids so you don't get dehydrated. T or F
4. Apply sunscreen on sunny days only. T or F
5. You only have to wear safety glasses when you are using a blower. T or F
6. Safety vest and safety cones are to be used when working in or around traffic. T or F

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Instructor: \_\_\_\_\_

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