

TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

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Location: 29 New End				End Tim	10: /	0.45.	3
Duration (Minutes)	ISMINS				ters Signature:	G Bru	
Presenters name:	G.Buck				V. 702 9.172		
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5				10	confirm that I ha	ve understood the Tool Bo	x Talk.
6				1	confirm that I ha	ave understood the Tool B	ox Talk
7				1	confirm that I h	ave understood the Tool	Box Talk
8					I confirm that I	have understood the Too	I Box Talk
9					I confirm that I	have understood the To	ol Box Talk
10					I confirm that	I have understood the T	ool Box Talk
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nt Claim information					I confirm t	hat I have understood	the Tool Box
: Claims can only be made for y	our employees or	labour-	only sub-co	ntrac	ctors		
No. Attended	Duration		tal Time	SISISISI		Employer	Reference
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ENT REFERENCE: SIT-FM-007	VERSION NO:		CREATION	DATE:		07/02/2013	No. of Concession, Name of Street, or other party of the Concession, Name of Street, or other pa

SHORT TRAINING SESSION ATTENDANCE SHEET

Title: Wew	BOND Street	HAGHT.		Dal		9.30	
Duration (Min			7	The same	d Time:	1.30	
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nt Claim infor Claims can only	mation be made for yi	our employees or	labour-only sub-	contra			
No. Attended		Duration	Total Time	में वाले के व		Employer Re 24537	
INT REFERENCE: NT OWNER:	SIT-FM-007	VERSION NO:	. CREATIC			07/02/2013	********



METHOD STATEMENT INDUCTION

ATTENDANCE SHEET TO BE COMPLETED FOR ALL METHOD STATEMENT TALKS (METHOD STATEMENTS ISSUED TO ALL PRESENT)

PAGE -3

CONTRACT:

Sebastian Street

MS REF:

B

	NAME (PRINT)	DATE ATTENDED	SIGNATURE	COMMENTS
1	D. RASCICIAI	13.02.2020		I confirm that I have read and understood the Risk Assessment and Method Statement
2	M. KOW ACSKI	17.02.2020	Love -	I confirm that I have read and understood the Risk Assessment and Method Statement
3	PO DOWARN	17.2.2020	flon-	I confirm that I have read and understood the Risk Assessment and Method Statement
4	A. Kulsing kas	18.02.20		I confirm that I have read and understood the Risk Assessment and Method Statement
5	1-SAHOTA	18/02/20	Isable	I confirm that I have read and understood the Risk Assessment and Method Statement
6				I confirm that I have read and understood the Risk Assessment and Method Statement
7				I confirm that I have read and understood the Risk Assessment and Method Statement
8				I confirm that I have read and understood the Risk Assessment and Method Statement
9				I confirm that I have read and understood the Risk Assessment and Method Statement
1 0			P. 182	I confirm that I have read and understood the Risk Assessment and Method Statement

Signed:

Position:

SUPERVISOR

Print Name: K. KULSINSKAS

Date: 17-02-20

WHEN COMPLETED RETURN THIS FORM TO THE RCL SAFETY OFFICER

Note on this side any points that have arisen which you may think should be brought to the attention of RCL and complete the attendance list above (add an extra sheet if necessary)

DOCUMENT REFERENCE: DOCUMENT OWNER:	SIT-FM-004 DAS	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE:	07/02/2013 01/03/2018	Page 1 of 1
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METHOD STATEMENT INDUCTION

ATTENDANCE SHEET TO BE COMPLETED FOR ALL METHOD STATEMENT TALKS

(METHOD STATEMENTS ISSUED TO ALL PRESENT)

PAGE-2

CONTRACT:

Sebastian Street

MS REF:

В

		DATE		
	NAME (PRINT)	ATTENDED	SIGNATURE	COMMENTS
1	H GORASIA	7/2/20	togothi	I confirm that I have read and understood the Risk Assessment and Method Statement
2	R. RAMA.	7/2/20	9	I confirm that I have read and understood the Risk Assessment and Method Statement
3	S. MIRANI	7/2/20	S. Lews	I confirm that I have read and understood the Risk Assessment and Method Statement
4	W.R. PAROL	10/2/2	AUSI	I confirm that I have read and understood the Risk Assessment and Method Statement
5				I confirm that I have read and understood the Risk Assessment and Method Statement
6			i de transcription de la company	I confirm that I have read and understood the Risk Assessment and Method Statement
7				I confirm that I have read and understood the Risk Assessment and Method Statement
8		a 1		I confirm that I have read and understood the Risk Assessment and Method Statement
9				I confirm that I have read and understood the Risk Assessment and Method Statement
1 0		* * * * * * * * * * * * * * * * * * *		I confirm that I have read and understood the Risk Assessment and Method Statement

Signed:

Position: SUPERVISOR

Print Name: K. KULSINSKAS

Date: 07/02/2020

WHEN COMPLETED RETURN THIS FORM TO THE RCL SAFETY OFFICER

Note on this side any points that have arisen which you may think should be brought to the attention of RCL and complete the attendance list above (add an extra sheet if necessary)

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METHOD STATEMENT INDUCTION

ATTENDANCE SHEET TO BE COMPLETED FOR ALL METHOD STATEMENT TALKS (METHOD STATEMENTS ISSUED TO ALL PRESENT)

PAGE - 1

CONTRACT: Sebastian Street MS REF: B

		DATE .	0	
	NAME (PRINT)	ATTENDED	SIGNATURE	COMMENTS
1	K.O'Malley.	15/01/10	4	I confirm that I have read and understood the Risk Assessment and Method Statement
2	D. Mennetty	15/01/20		I confirm that I have read and understood the Risk Assessment and Method Statement
3	Rikmus	15/01/20	Refe	I confirm that I have read and understood the Risk Assessment and Method Statement
4	A Rate 1	15/0/20	RAI	I confirm that I have read and understood the Risk Assessment and Method Statement
5	Joseph smith	15/01/20	J. Smelh	I confirm that I have read and understood the Risk Assessment and Method Statement
6	H.MANILAC	15/0//20	the	I confirm that I have read and understood the Risk Assessment and Method Statement
7	D Congers	27/01/20	Den	I confirm that I have read and understood the Risk Assessment and Method Statement
8	BERNARAOR	28/01-20	80	I confirm that I have read and understood the Risk Assessment and Method Statement
9		25/01/20	0	I confirm that I have read and understood the Risk Assessment and Method Statement
1 0	TOMPHE	03/02/20		I confirm that I have read and understood the Risk Assessment and Method Statement

Signed:

Position:

Supervisor

Print Name: K/.Kulsinskas

Date: 15-01-2020

WHEN COMPLETED RETURN THIS FORM TO THE RCL SAFETY OFFICER

Note on this side any points that have arisen which you may think should be brought to the attention of RCL and complete the attendance list above (add an extra sheet if necessary)

DOCUMENT REFERENCE: DOCUMENT OWNER:	SIT-FM-004 DAS	VERSION NO:	1.1	CREATION DATE: LAST REVISION DATE:	07/02/2013 01/03/2018	Page 1 of 1
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RAPHA EL CONTRACTING LTD

PERSONAL PROTECTIVE EQUIPMENT ISSUE REGISTER

SITE: SEBASTIAN STREET

	DATE	61-6-21	21-6-10	20/19	3/8/19	30/04/101	17/0/21	25/10/19	30/0/19	16/11/19	26/11/15	5/11/19	13/01/20	18/02/20
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	OPERATIVE NAME	C.NEON	K. KULS 1NS 1S AS	Aminesh Patei	14. MANILAL	Joseph Smith	K. KULS INSKAS	K. ONALEY	D. HENDLESS Y	H.MANILAC	A. PATE C). Meyness.	R. RAMINS	A.KULSINSKAS

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-FM-008 VERSION NO: 1.3
SIT-EM-008 VERSION NO: 1.3
SIT-FM-008 VERSION NO:
SIT-FM-008 DAS

Before starting work, STOP, THINK and CHECK If the answer to any question below is NO, do not start work until the issues are resolved	Yes No N/A
1. Method statements, risk assessments and permits	
Have you read and understood the method statement and risk assessment for the task?	>
Is everyone on your team briefed on the method statement for the task?	
Have you carried out your weekly toolbox talk? Please give title of toolbox talk:	2
Do you have COSHH Assessments and Safety Data Sheets in place for all hazardous substances that will be used? Have you carried out Manual Handling Assessments and planned for any deliveries / extraordinary activities?	ر د
2. Place of work	
Are you satisfied that your team has a safe place to work?	١
Have you checked access equipment has been inspected as required and certification issued? E.g. Podium steps, scaffold towers	
Are other contractors working adjacent to you aware of what you are doing today? Are you aware of what they will be doing?	د د
Are third parties and members of the public securely protected from falling materials?	ر ،
Does your team know the safe access and egress routes to their places of work?	
3. Task specific	
Are all necessary tools and equipment on site to carry out your work in a safe / efficient manner?	2
Are you confident there are no health and safety risks in your work task(s)?	٦
Are you certain that the operatives you are putting to work are competent for their assigned tasks?	٦
Are the team equipped with the correct PPE to carry out the task?	7
4. Variations	
Have the team members changed? (If yes revise)	2
Has the task or working environment changed significantly to require a risk assessment and method statement (If yes, work to stop and new method statement to be produced)	2

Remember, as the supervisor YOU are responsible for the safety of YOUR team

RAPHA ZI

()	F 0		Site Mar	lager's D	aily S	Site Manager's Daily Safe Start		
Contract:	Sebastian Street	Site Manager:	Kes Kulsinskas	Date (w/c):	;(o):	10-02-20	Method statement (s) (Title, Rev No. & Rev date)	8
Location and description of works:		SKIRT/ARCH L-	IRON HONGER	BCL PANELS	151.5	1-1/65		
				Site Manager's Daily Sign Off	aily Sign C	H H		
		Date	7	Name		Signature	Hot Topics of the Day (the main points you discussed)	the Day
Monday	10-	10-02-20		Kes Kulsinskas	2	9	700	
Tuesday	- 11-	11-02-20		Kes Kulsinskas		K	FIRST AID	
Wednesday	12-(12-02-20		Kes Kulsinskas		Kul	SAFE STAC	STACKING
Thursday	13-(13-02-20	2	Kes Kulsinskas		hul	I	140P - UPS
Friday	14-(14-02-20		Kes Kulsinskas		In I	1	MASKS
Saturday							١.,	
Sunday					7	-		
				Operatives Daily Sign Off	y Sign Off	7		
Name		Signature		ı Σ	×	F S S	Comments	ıts
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S. HIRANI		S. Lycen	-	7	1	7		
7) . Honneston		The state of the s		7	7	7		**
H. MANILA		KA		X	7	7		
)						*.
NOTE IF YOU HAVE MORE THAN 10 OPERATIVES ON SITE, PLEASE USE THE CONTINUATION SHEET	DPERATIVES ON SITE, PLEASE I	USE THE CONTINUATION SHEET						* 1



TRAINING AND DEVELOPMENT PLAN SHORT TRAINING SESSION ATTENDANCE SHEET

Title: PPE				Date: 20-02-20
Location: SEBASTIAN STREET			S	Start Time: 730
Duration (Minutes) 3 0			E	and Time: 800
Presenters name: K.KULSINSKA			+ /	Presenters Signature:
	Candidate's Name	- x * 2	Name of Employe	r Candidate's Signature
1	Joseph SMITH		RCL	I confirm that Llave understood the Tool Box Talk
	T DOMANISK	-	RCI	
3	1. 1011/10 521		,,,,	Confirm that I have understood the Tool Box Talk
	H GORASO A		RCL	I confirm that Thave understood the Tool Box Talk
4	PO Donougn		R.C.1	I confirm that I have understood the Tool Box Talk
5	K. O'Malley		RCC	I confirm that I have understood the Tool Box Talk
6	a. aumn	2 X	RCL	
7	0 11			I confirm that I have understood the Tool Box Talk
8	U. Mennessy		R.C.L	I confirm that I have understood the Tool Box Talk
•	BERNARDO	Ru	K.CL	I confirm that I have understood the Tool Box Talk
9	S. HIRANI		R.C.L.	I confirm that I have understood the Tool Box Talk
	1- SAHOTA		RCL	I confirm that I have understood the Tool Box Talk
11	D. RASCICIAI		RICL	I confirm that I have understood the Topol Box Talk
12	S. Simonovic	2	RCL	I confirm that have understood the Tool Box Talk
13	W-P Para	i mi	R-CI	confirm that I have understood the Tool Box Talk
14	17 100		/ C	1 confirm that I have understood the Topi Box Talk
15				I confirm that I have understood the Tool Box Talk
15				I confirm that I have understood the Tool Box Talk
Grant Claim information Note: Claims can only be made for your employees or labour-only sub-contractors				
No. Attended Duration		Total Time	tractors Employer Reference	
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DOCUMENT OWNER:

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LAST REVISION DATE: