

Name _____
 Telephone _____
 Date _____

P Acceptable, **C** Needs coaching or supervision, **F** Not acceptable.

ITEM	CONDITIONING	P	C	F	Comments
1	Operator				
2	Well Being				
3					
4					
5	ITEM	P	C	F	
6	Know Your Knots				
7	Bowline				
8	Running Bowline				
9	Bowline with Yosemite tie-off				
10	Mid-line clove hitch				
11	Clove Hitch with 2 half hitches				
12	Blake's hitch				
13	Sheet bend				
14	Double sheet bend				
15	Timber hitch				
16	Cow hitch w2 half hitches				
17	Figure 8stopper knot				
18					
19	ITEM	P	C	F	
20	Rope and Tools				
21	Tree gaffs inspected and proper fitting				
22	Climbing saddle current and proper fitting				
23	2 adjustable climbing lanyards inspected				
24	Climbing rope 120ft-200ft minimum MBS 5400lb. Rated				
25	23.5kn Climbing double lock Carabiners				
26	Retrievable Friction saver				
27					
28	ITEM	P	C	F	
29	WORK PROCEDURES				
30	Checks partner regularly (20-30 min)				
31	Saw Turned Off To Conduct crew - Check				
32	Understands Workings of an FLHA				
33	Inspects equipment as per manufacturers instructions				
34	Inspects tree and site for hazards				
35	Climbs to set height and crosses branches staying tied in				
36	Keeps slack out of rope or lanyards while ascending				
37	Ties in and rappels down using appropriate knots/device				
38	Cuts limb with handsaw				
39	Does not cut near/towards rope or lanyard				
40	Controls limb while cutting				
41	Command and respond "clear-all clear"				
42	Cuts limb or top with chainsaw				
43	Uses two hands on chainsaw				
44	Uses two means of tie in				
45					
46					
47					
48	ITEM	P	C	F	
49	Timed Tree Rescue				
50	Calls for help				
51	Climbs safely to suitable TIP above victim				
52	Secures victim to self				
53	Rappels down to victim without further harm to them				
54	Time <15 minutes Pass				
55	Timed <25 minutes Caution				
56	Timed 35 or > minutes Fail				
57					
58	ITEM	P	C	F	
59	PPE				
60	CSA/ANSI helmet c/w 24dba or > muffs plus chin strap				
61	CSA Z87 safety glasses				
62	CSA Foot wear				
63	Tested / Rated saw leg protection				
64	Gloves				
65	P1 First Aid kit				

Signature:
 Trainer /
 Supervisor _____

 Student _____

Date dd/mm/yyyy _____