

CDX Tasksheet Number: MHTS008

Student/Intern Information

Name _____ Date _____ Class _____

Vehicle, Customer, and Service Information

Vehicle used for this activity:

Year _____ Make _____ Model _____

Odometer _____ VIN _____

Materials Required

- Program's shop policy and other safety information
- Safety Data Sheets (SDS) book
- Fire extinguisher(s) from the shop
- SDS for the products listed

Task-Specific Safety Considerations

- Eye wash stations are an important component of shop safety. Always know their location, purpose, and use.

► **TASK** Identify the location and use of eye wash stations.

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SPS08

Student Instructions: Read through the entire procedure prior to starting. Prepare your workspace and any tools or parts that may be needed to complete the task. When directed by your supervisor/instructor, begin the procedure to complete the task and check the box as each step is finished. Track your time on this procedure for later comparison to the standard completion time (i.e., "flat rate" or customer pay time).

Time off _____

Time on _____

Total time _____

Procedure:	Step Completed
1. Research the location, purpose, and use of eye wash stations in your shop:	
a. Describe the purpose of an eye wash station.	<input type="checkbox"/>
b. Describe the proper use of an eye wash station (including time).	<input type="checkbox"/>

c. What type of eye injury would use of an eye wash station NOT be appropriate for?	<input type="checkbox"/>
2. Label the location of the eye wash station(s) on the diagram of the shop at the end of this section.	<input type="checkbox"/>

Non-Task-Specific Evaluations:	Step Completed
1. Tools and equipment were used as directed and returned in good working order.	<input type="checkbox"/>
2. Complied with all general and task-specific safety standards, including proper use of any personal protective equipment.	<input type="checkbox"/>
3. Completed the task in an appropriate time frame (recommendation: 1.5 or 2 times flat rate).	<input type="checkbox"/>
4. Left the workspace clean and orderly.	<input type="checkbox"/>
5. Cared for customer property and returned it undamaged.	<input type="checkbox"/>

Student signature _____ Date _____

Comments:

Have your supervisor/instructor verify satisfactory completion of this procedure, any observations found, and any necessary action(s) recommended.

Evaluation Instructions: The scoring box below is intended to act as a guide for both student and supervisor/instructor. Each criterion listed will help students to understand what is expected of them and help supervisors/instructors articulate the level of success at a particular task. The scoring is set up to allow a second attempt at each task (see the Test and Retest columns). Scoring is also designed to award students points only for task criteria that were completed correctly. Points are lost for failure to complete the employability requirements (see Non-Task-Specific Evaluation criteria). When all criteria are evaluated, tally the points for a total at the bottom of each column.

Tasksheet Scoring

	Test		Retest	
Evaluation Items	Pass	Fail	Pass	Fail
Task-Specific Evaluation	(1 pt)	(0 pts)	(1 pt)	(0 pts)
Student described the location of the eye wash station.				
Student explained how to operate the eye wash station.				
Student explained how long to use an eye wash station.				
Student explained which eye injuries should not use an eye wash station.				
Non-Task-Specific Evaluation	(0 pts)	(-1 pt)	(0 pts)	(-1 pt)
Student successfully completed at least three of the non-task-specific steps.				
Student successfully completed all five of the non-task-specific steps.				
Total Score: <total # of points/4 = %>				

Supervisor/Instructor:

Supervisor/instructor signature _____ Date _____

Comments:

Retest supervisor/instructor signature _____ Date _____

Comments:

