

Additional Equipment and Tool Review (Form 4)

This form is only for previously approved YST employers that want to add new (additional) equipment/tools. Approval is required prior to 16-17-year-old student learner use.

Employer name:		Date:	
Address:			
Contact person:		Phone:	
Email:		Industry:	

Please list all new machines, tools and equipment that you would like reviewed for 16-17-year-old student learner use as part of a Youth Skills Training (YST) paid work experience.

YST POWER-DRIVEN TOOLS & MACHINERY EVALUATION:					
MACHINE/TOOL/ EQUIPMENT NAME:	BRAND/DATE OF MANUFACTURE	USED FOR:	SAFETY FEATURES:	PPE REQUIRED:	DLI Use Only:

Once this form is completed and submitted to the Youth Skills Training (YST) Program, you will be contacted to schedule a virtual or in person meeting to review. Please send completed form to Jo.Daggett@state.mn.us

Updated 7-9-24

YST POWER-DRIVEN TOOLS & MACHINERY EVALUATION:					
MACHINE/TOOL/ EQUIPMENT NAME:	BRAND/DATE OF MANUFACTURE	USED FOR:	SAFETY FEATURES:	PPE REQUIRED:	DLI Use Only:

A safety consultant will review listed machines/tools/equipment and provide comments below. The DLI Commissioner will review and provide final approval. Machines/tools/equipment reviewed will be listed in one of three categories for 16-17-year-old student learner use as part of a paid YST work experience (unlimited use, 1 hour per shift or 20% of a shift-*whichever is less*, or prohibited for 16-17 year old student learner use).

Safety Consultant Name:

Date Reviewed:

Comments:

The employer agrees to follow YST program requirements and will not allow student learners to use machines/tools/equipment that were not reviewed or were reviewed and not approved for 16-17-year-old student learner use.

Employer Supervisor Name:	Signature:	Date:
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Labor & Industry Name:	Signature:	Date:
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