

Hazardous Occupation Exemption Form

The following form identifies any allowable job tasks or responsibilities that a student enrolled in a work-based learning (WBL) course may perform in accordance with [T.C.A. § 50-5-107](#). All safety training associated with Hazardous Occupations must be documented in the student's [Safety Training Log](#).

Student Name:	Work Site:
Address:	Address:
DOB:	Supervisor:

Check the Hazardous Occupation for which the exemption applies:

- ☐ Work using power-driven woodworking machines, including the use of saws on construction sites.
- ☐ Work using power-driven metal forming, punching, and shearing machines.
- ☐ Work using power-driven paper products machines, including the operation and loading of paper balers in grocery stores.
- ☐ Work involving the use of circular saws, band saws, and guillotine shears.
- ☐ Work in roofing operations.
- ☐ Work in excavating operations, including work in a trench as a plumber.

In accordance with T.C.A. § 50-5-107 (10), (11), and (12), the undersigned attest to the following:

1. The student learner is enrolled in a cooperative educational training program under a recognized state or local education authority.
2. The work of the student learner in the occupation declared particularly hazardous is incidental to the training received.
3. The work performed shall be intermittent, for short periods, and under the direct and close supervision of a qualified and experienced person.
4. The safety instructions shall be given by the school and correlated by the employer with on-the-job training.
5. The student has a schedule of organized and progressive work processes to perform on the job.

Signatures *(all identified individuals must sign below prior to the start of the student placement)*

Student:	Date:
Parent or Guardian:	Date:
Endorsed Teacher <i>(When not the WBL Coordinator)</i>	Date:
WBL Coordinator	Date:
Principal or CTE Director:	Date:
Worksite Supervisor:	Date:

Nondiscrimination: No person shall be excluded from participation in, be denied benefits of, or otherwise be subjected to discrimination in connection to this program and activities or in employment practices on the grounds of handicap or disability, age, race, color, religion, sex, national origin, or any other classification protected by federal or state law. This form is subject to monitoring by the Tennessee Department of Education and Tennessee Department of Labor & Workforce Development.