

# Excavation/Trenching Competent Person Evaluation Checklist



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Project Title:

Evaluator Name & Title:  Date:

*Instructions: This checklist shall be completed to assist the Employer in determining if the person he/she has designated as a Competent Person is competent within the description and intent of the excavation & trenching standards.*

## Designated Individual's General Information

Employee's name:

Length of time with employer:  Occupation:

Length of experience in excavation and trenching activities:

## Training

Has the employee been trained in Soils Classification Methods? 

Yes	No
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Has the employee been trained in the use of Excavation & Trenching protective systems? 

Yes	No
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Has the employee been trained in the requirements of OSHA 1926 subpart P (excavations)? 

Yes	No
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Has the employer designated the employee as competent (via letter of competency)? 

Yes	No
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If no to any of the above, please explain below:

## Knowledge

Does the employee have knowledge in the following topics listed in the training section? 

Yes	No
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If no, please explain in detail below:

## Authority

Does the designated individual have the authority to take prompt corrective measures to eliminate existing and predictable hazards as it pertains to excavation & trenching activities? 

Yes	No
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Does the designated individual have the authority to stop work until hazards are corrected, eliminated or controlled as well as remove employees from the hazardous area / situation until proper controls have been established? 

Yes	No
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## Determination / Comments

Do you consider the designated individual to be truly Competent within the requirements of OSHA 1926 Subpart P? 

Yes	No
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If no, please explain below (include areas to be strengthened or additional training required):

Evaluator Signature:  Date: