**Attendee Background**

**Warehouse Worker Hazards in Structural Steel Fabricating and Supply Companies-Train the Trainer Session**

Program Information: *Steel Warehouse Worker “Train the Trainer”, Insert Date and Location*

Please answer the following questions:

1. Your primary business (you may circle more than one)

[ ]  Steel Fabrication

[ ]  Steel Supply Service Center

[ ]  Steel Supply Mill

[ ]  Steel Erection

[ ]  Engineering

[ ]  Architecture

[ ]  Constructor

[ ]  Equipment Supplier

[ ]  Safety Trainer

[ ]  Educator

[ ]  Other (Please Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Are you a member of AISC?

[ ]  Yes [ ]  No

3. Do you utilize the AISC Safety Channel at [www.AISC.org](http://www.AISC.org) or materials from the AISC Safety Committee

[ ]  Yes [ ]  No

4. What is your title within your company? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Do you personally have any of the safety responsibilities below within your company?

 (Indicate all that apply)?

[ ]  Company, plant, shop or facility Safety Director

[ ]  Directly supervising of workers such as shop supervisor or foreman

[ ]  Authorizing safety training in your facility

[ ]  Conducting safety training in your facility

[ ]  Maintaining training records

[ ]  Maintaining safety incident records

[ ]  Reporting incidents to OSHA or to your State OSHA

[ ]  None

[ ]  Other (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. How is safety training usually delivered for your workers in your facility? (Indicate all that apply)

[ ]  Formal hazard specific training conducted by company staff

[ ]  Formal hazard specific training conducted at your facility by outside training organizations

[ ]  Attendance at training programs conducted by outside training organizations (offsite)

[ ]  Regularly scheduled (daily or weekly) shift safety or tool box talks

[ ]  No training provided

[ ]  Other (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. What is your gender?

[ ]  Male [ ]  Female

8. What is your age? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. What is your ethnicity?

[ ]  American Indian [ ]  Black, African American [ ]  Pacific Islander [ ]  Asian

[ ]  Hispanic (Latino) [ ]  White [ ]  Other

10. What is your native language?

[ ]  English [ ]  Spanish [ ]  Other (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. How many years have you been in the steel industry? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_?

12. What is your highest educational level? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_?

13. About how many hours of health and safety training have you had in the past year? \_\_\_\_\_\_

14. Has your past health and safety training included warehouse worker hazards?

[ ]  Yes [ ]  No

15. Was the training conducted in your native language?

[ ]  Yes [ ]  No

16. How well did you understand the material that was provided during training?

[ ]  Very Well [ ]  Moderately Well [ ]  Not Sure [ ]  Not Very Well [ ]  Not At All

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