

Name _____ Date _____

This Guild Shop Evaluation Form will follow you through all the classes you complete in the Guild. Your self-evaluation will be noted, along with the instructor's evaluation.

Intro to Safety and Orientation, Date attended _____ Instructor _____

Your workshop experience: None ____ Solo ____ With others ____ A Supervisor ____

Have your own Personal Protection Equipment: Yes ____ No ____ PPE handout ____

Tools you own and/or use: Hand tools ____ Portable power tools ____ Stationary ____

Member self evaluation

Guild Instructor's evaluation below

	B	Int	Adv	Needs more instruction	Passed	Date	Instructor
Table saw							
Jointer							
Planer							
Chop saw							
Drill press							
Sanding machines							
Router							
Router table							
Band saw							
Wide belt sander							
Sliding Table saw							
Mortisers							
Circular saw							
Portable power tools							
Jig saw							
Drill motor							
Trim router							
Hand sanders							