



Name:	Date:	Agency/Cooperator Name: <p style="text-align: center;">BCHW</p>
Training Location: Classroom- Field-		Address:
Telephone Number:		<input type="checkbox"/> Yes, I permit the Forest Service to share my Sawyer qualifications and e-mail address with other federal agencies and non-federal organizations so that I can be contacted about saw project opportunities in my area. _____ (Please initial here)
E-mail Address:		

Previous Certification: Yes No Level _____ Agency/Unit _____ Year _____

First Aid/CPR: I certify that I have completed and will maintain current first aid and CPR training _____ (initial)

BELOW THIS LINE TO BE COMPLETED BY SAWYER EVALUATOR

SAFETY EQUIPMENT AND TOOLS

Y/N		Y/N		Y/N	
	Hard hat		First aid kit		Saw sheath
	Eye protection		Saw selection & condition		Axe sheath
	Long-sleeved shirt		Axe selection & condition		Whistle/radio/cellular telephone
	Gloves		Maintenance of saw & axe		
	Boots		Wedges		

SAW USE: APPLIES TO ALL CUTTING OPERATIONS

SCORE		SCORE	
	Transportation of saw & axe		Correct body position and technique
	Sheath placement & removal		Cut preparation
	Field storage of saw & axe		Positive communication with co-workers
	Saw passing		Control of cutting area

LIMBING and BRUSHING

SCORE		SCORE	
	Overhead & ground hazard analysis		Swamp out of work area
	Limb removal sequence		Use of axe and general technique
	Escape route		Spring poles (tension/compression analysis)

BUCKING

SCORE		SCORE	
	Overhead & ground hazard analysis		Single bucking
	Escape route		Double bucking
	Swamp out of work area		Underbucking
	Bind/tension (compression analysis)		Wedging procedure
	Bucking sequence		Axe use and general technique
	Kerf observation		Communication with partner
	Use of compound cuts		

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Note to Evaluator: Use a scale of 1 through 3 to identify proficiency: 1 = Needs Work, 2 = Demonstrates Ability, 3 = Shows Strength. 0 or N/A means trainee was not evaluated in area or Not Applicable. Fill in all blanks.



Sawyer Name: _____

FELLING							
SCORE		FELLING AREA		SCORE		FELLING PROCEDURE CONTINUED	
			Control of cutting area				Procedure alteration (if necessary)
			Ground & overhead hazard analysis				Wedging procedure
			Positive communication				Saw removal
			FELLING PROCEDURE				Use of escape route/safety zone
			Go/no go decision/walk away				Exposure time at stump
			Plumbing of lean (determination of lay)				STUMP ANALYSIS
			Cutting Plan				Felling to desired lay
			Use of gunning sights				Undercut/facecut
			Undercut/facecut				Back cut
			Warning shout				Stump shot
			Back cut				Hinge/holding wood
			Proper body position/looking up				Other

EVALUATOR'S STUMP ANALYSIS SKETCHES

Tree 1	Tree 2	Tree 3
Height _____ DBH _____	Height _____ DBH _____	Height _____ DBH _____
% Slope _____ Species _____	% Slope _____ Species _____	% Slope _____ Species _____
Condition _____	Condition _____	Condition _____
Feet from center of lay _____	Feet from center of lay _____	Feet from center of lay _____

COMMENTS: Attitude, Confidence, Comfort level, Technical Skills, Awareness, Verbal Skills, Weak-Strong Traits, etc.

Certification Level, Subject to Final Approval

- A Sawyer
 B Sawyer – Bucking
 B Sawyer – Felling and Bucking
 C Sawyer – Bucking
 C Sawyer – Felling and Bucking
 C Sawyer Evaluator

Sawyer Level _____

Evaluator's Name _____ Evaluator's E-mail Address _____

Sawyer Level _____

Evaluator's Name _____ Evaluator's E-mail Address _____

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