

**Kansas Vocational Rehabilitation Services
JOB SAFETY ANALYSIS**

Business Name:

Job Title:

Supervisor:

Analyzed By:

Date:

Required PPE:

Reviewed By:

Date:

Required Physical Safeguards:

Approved By:

Date:

Required Operational Changes:

Approved By:

Date:

Sequence of Job Steps	Potential Hazards	Safe Job Procedure
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Business Name:

Job Title:

Analyzed By:

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