

# Electrical Qualified Person Form

## Electrical Qualified Person

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Department: \_\_\_\_\_

Supervisor: \_\_\_\_\_

A qualified person must be trained and familiar with the construction and operation of equipment and must be able to recognize and avoid electrical hazards that might be present. This is a combination of the person's education and experience, on-the-job training at the current employer for the type of equipment encountered (ex. testing for absence of voltage, installing/removing temporary grounds, departmental policies, equipment-specific training, etc.), and safety-related information and training regarding hazards and protective equipment.

## Qualifications

### Electrical License

- Master Electrician License
- Journeyman Electrician License
- Journeyman Lineman
- Apprentice Program in electrical field

Granted by:  Virginia  Other

License is:  current  expired

### Electrical-Related Education/Experience

- Associate's degree (2-year) in an electrical field from a trade/technical school or community college
- Bachelor's degree (4-year) in an electrical engineering field
- Electrical Experience: \_\_\_\_\_ years

### Other Training

- Proper care, maintenance, and use of electrical test equipment (i.e., multi-meters)
- Other (specify) \_\_\_\_\_

## Electrical PPE Issued and/or Available for Use

- Voltage-rated gloves, Class: \_\_\_\_\_
- Arc-flash rated gloves, ATPV: \_\_\_\_\_
- Arc-flash shirt, ATPV: \_\_\_\_\_
- Arc-flash pants, ATPV: \_\_\_\_\_
- Arc-flash coveralls, ATPV: \_\_\_\_\_

- Arc-flash suit, hood, and gloves, ATPV: \_\_\_\_\_
- Arc-flash rated face shield, ATPV: \_\_\_\_\_
- Other (specify) \_\_\_\_\_

## Supervisor's Signature

This employee has been issued/provided access to the electrical PPE noted above.

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Employee's Signature

I agree to discuss any work that is outside of my skills and knowledge with my supervisor or lead person before proceeding.

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_