

| Sawyer Name: Date: | | | Age | Agency/Cooperator Name: | | | | |
|--------------------------------------|--------|--|---|--|--|---|--|---|
| Training Location: Classroom: Field: | | | | Saw | Sawyer Address: | | | |
| Telepl | hone | e Number: | | | | | | |
| E-mail Address: | | | | mail a | 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(initial) | | | |
| Previo | ous (| Certification: Yes | No | Level_ | Age | ency/Unit | | Year |
| First A | Aid/(| CPR: I certify that I have comp | | | | | | |
| | | BELOW | | | | Y SAWYER E | | ATORS |
| | | | | FETY EQ | UIPMEN' | T AND TOOL | • | |
| Y/N | | | Y/N | | | | Y/N | |
| | + | ard hat | | Boots | | | | Axe selection, condition & guard |
| | | ye protection | | Chaps First Aid Kit Whistle/radio/co | | | | Chainsaw condition, guard & brake |
| | | earing protection | | | | | | Chain saw tool kit |
| | | ong-sleeved shirt | | | | ar/telephone | | Approved fuel and oil containers |
| | Gloves | | | Wedges | | | | |
| n | ı | Evaluators m | • | up to 3 at | | sawyer to demo | - | • |
| D | o no | Evaluators mot use checkmarks: 0 or N/A | = Not Ev | up to 3 at | 1 = Needs | • | monstr | ates Ability, 3 = Shows Strength |
| | o no | Evaluators m ot use checkmarks: 0 or N/A: W Overhead & ground hazard an | = Not Ev | up to 3 at | 1 = Needs SSMENT | Work, 2 = De AND PREPAR Swamp out of | monstr ATION work a | ates Ability, 3 = Shows Strength N rea |
| | o no | Evaluators m ot use checkmarks: 0 or N/A: W Overhead & ground hazard ar Cut-No cut decision | = Not Ev ORKSI' | up to 3 at valuated, TE ASSE | 1 = Needs SSMENT | Work, 2 = De AND PREPAR Swamp out of Spring poles: | monstr RATION work and tension/ | rea compression analysis |
| | o no | Evaluators mot use checkmarks: 0 or N/A: W Overhead & ground hazard and Cut-No cut decision Escape route preparation, both | = Not Ev ORKSI' | up to 3 at valuated, TE ASSE | 1 = Needs SSMENT | Work, 2 = De AND PREPAR Swamp out of | monstr RATION work and tension/ | rea compression analysis |
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| | FI | ELLING | |
|-------|---|--------|-------------------------------------|
| SCORE | FELLING AREA | SCORE | FELLING PROCEDURE |
| | Go/no-go decision/walk away | | Procedure alteration (if necessary) |
| | Control of cutting area | | Wedging procedure |
| | Positive communication | | Saw removal |
| | | | Use of escape route/safety zone |
| | FELLING PROCEDURE | | Exposure time at stump |
| | Cutting Plan | | Boring the back cut |
| | Plumbing of lean (determination of lay) | | STUMP ANALYSIS |
| | Use of gunning sights | | Felling to desired lay |
| | Under cut/face cut | | Under cut/face cut |
| | Warning shout | | Back cut |
| | Back cut | | Stump shot |
| | Proper body position/looking up | | Hinge/holding wood |
| 1 | | | |

EVALUATOR'S STUMP ANALYSIS SKETCHES

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

| Certification Level (subject to final approval) | | | | | | |
|---|--------------------------------|--------------------|--|--|--|--|
| COMMENTS: Attitude, Confidence, Comfort level, Technical Skills, Awareness, Verbal Skills, Weak-Strong Traits, etc. | | | | | | |
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| | | | | | | |
| A Sawyer - Bucking | A Sawyer – Felling and Bucking | | | | | |
| B Sawyer – Bucking | B Sawyer – Felling and Bucking | C Bucker Evaluator | | | | |
| C Sawyer – Bucking | C Sawyer – Felling and Bucking | C Sawyer Evaluator | | | | |
| First Evaluator Signature | | Sawyer Level | | | | |
| Name (print) | E-mail | | | | | |
| Second Evaluator Signature | | Sawyer Level | | | | |
| Name (print) | E-mail | | | | | |
| Sawyer Signature | | | | | | |