

Training Subject \_\_\_\_\_ Date \_\_\_\_\_ Location \_\_\_\_\_

***Trainee Certification of Training***

I have received on-the-job training on those subjects listed (see other side of this sheet): This training has provided me adequate opportunity to ask questions and practice procedures to determine and correct skill deficiencies. I understand that performing these procedures/practices safely is a condition of employment. I fully intend to comply with all safety and operational requirements discussed. I understand that failure to comply with these requirements may result in progressive discipline (or corrective actions) up to and including termination.

| Employee Name | Signature | Date  |
|---------------|-----------|-------|
| _____         | _____     | _____ |
| _____         | _____     | _____ |
| _____         | _____     | _____ |
| _____         | _____     | _____ |
| _____         | _____     | _____ |

***Trainer Certification of Competency***

I have conducted orientation/on-the-job training to each employee listed above. I have explained related procedures, practices and policies. Each employee was given opportunity to ask questions and practice procedures in the learning environment. Based on each student's performance, I have determined that each employee trained has adequate knowledge and skills to safely perform these procedures/practices.

| Trainer Name | Signature | Date |
|--------------|-----------|------|
|--------------|-----------|------|

***Supervisor Certification of Competency***

I observed/interviewed the above employees on \_\_\_\_\_ date(s). Each employee has demonstrated adequate knowledge and skills to safely perform all steps of the procedures/practices in the work environment (at their workstation, worksite, etc.).

| Trainer Name | Signature | Date |
|--------------|-----------|------|
|--------------|-----------|------|

The following information was discussed with students: (check all covered subjects)

- ☐ Overview of the hazard communication program - purpose of the program
- ☐ Discussion of the hazards of chemicals to which students will be exposed
- ☐ Primary, secondary, portable, and stationary process container labeling requirements
- ☐ Discussion of the 16 sections of the SDS and their location
- ☐ Emergency and Spill procedures
- ☐ First aid procedures
- ☐ Symptoms of overexposure
- ☐ Use/care of required personal protective equipment used with the above chemicals
- ☐ Employee accountability

The following practice/performance exercises were conducted:

- ☐ Spill procedures
- ☐ Emergency procedures
- ☐ Personal protective equipment use

The following written test was administered: (Or "Each student was asked the following questions:")  
(Keep these tests as attachments to the safety training plan and merely reference it here to keep this document on one sheet of paper)

1. What are the labeling requirements of a secondary container? (name of chemical. and hazard warning)
2. When does a container change from a portable to secondary container? (when employee loses control)
3. What are the symptoms of overexposure to \_\_\_\_\_? (stinging eyes)
4. Where is the "Right to Know" station (or SDS station) located? (in the production plant)
5. What PPE is required when exposed to \_\_\_\_\_? (short answer)
6. How do you clean the PPE used with \_\_\_\_\_? (short answer)
7. What are the emergency procedures for overexposure to \_\_\_\_\_? (short answer)
8. Describe spill procedures for \_\_\_\_\_. (short answer)
9. When should you report any injury to your supervisor? (immediately)
10. What are the consequences if you do not follow safe procedures with this chemical? (injury, illness, discipline)