

Laboratory Safety Training Documentation Form

Employee/Student Name: _____ Employee/student id #: _____

Job Title or student status:
(e.g. volunteer, 494, grant funded research) _____

Training - General Lab Safety

- _____ Basic laboratory rules and Standard Operating Procedures
- _____ Content and requirements of the Laboratory Safety Standard
- _____ Content, location and availability of the Chemical Hygiene Plan (CHP)
- _____ Use and location of Safety Data Sheets
- _____ The exposure limits for chemicals used in the employee's laboratory
- _____ Signs and symptoms of exposure to the hazardous materials used in the laboratory
- _____ Availability and use of Personal Protective Equipment (PPE)
- _____ Emergency response procedures

Training provided by: _____ Date of training: _____

Training - Laboratory Specific Hazards

The Principal Investigator or laboratory manager must assess hazards in their laboratory, devise reasonable hazard mitigation measures, and convey this information to entities under their supervision.

I have assessed hazards in my laboratory, and provided hazard mitigation and appropriate safety training for the laboratory under my supervision.

Signature: _____ Name: _____ Date: _____

Employee/Student:

I hereby acknowledge that I have received training on the subjects indicated above.

Signature: _____ Date: _____

