

Chemical Hygiene Plan Training Certification

The individuals listed below have read and fully understand the Chemical Hygiene Plan. The individuals have received training from their supervisor and are aware of all potential hazards and countermeasures related to working in a laboratory, how to practice good chemical hygiene, and where to find safety information in order to perform their duties in a safe manner.

Lab Personnel Name:

Signature:

1. _____

2. _____

3. _____

4. _____

5. _____

The above stated individuals have demonstrated the ability to work safely in a laboratory per the Chemical Hygiene Plan.

Supervisor/Instructor/Trainer Name: _____

Signature: _____ Date: _____