

## Departmental Training Record Laboratory Employee

The undersigned laboratory employee was informed of the following:

The existence of the Chemical Hygiene Plan and requirements of the Laboratory Standard (29 CFR 1910.1450);

The location and availability of the Chemical Hygiene Plan;

Permissible exposure limits for regulated substances and recommended exposure limits where no OSHA standard applies;

Signs and symptoms associated with exposure; and

The location and availability of reference materials, including Safety Data Sheets that identify hazards, safe handling, storage, and disposal of hazardous chemicals in the laboratory.

The undersigned laboratory employee was trained in the following areas:

The components of the Chemical Hygiene Plan and how it is implemented in the laboratory;

Hazards of chemicals in the work area and protective measures employees can take;

Specific procedures to provide protection, including engineering controls, work practices, and personal protective equipment; and

Methods and observations (e.g., continuous monitoring procedures, visual appearance, or smell) used to detect the presence of hazardous chemicals.

## Reason for training:

Initial training	New exposure situation	Periodic re-training
Employee Signature		Date
Employee Name – PRINT CLEARLY		U Number
Trainer/Laboratory Supervisor Signat	ure	Date
Department must ret	ain a copy of this document	for proof of training.