STUDENT & EMPLOYEE REVIEW OF TRAINING

All laboratory personnel must be able to answer the following questions upon request by the CHO or other safety personnel.

This form should be maintained by the Laboratory Supervisor/Responsible faculty.

ROOM # _____

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• Do you know what the Chemical Hygiene Plan is and where it is located?
• Do you know what Material Safety Data Sheets are and where they are located?
• Do you know where the Standard Operating Procedures are for the lab?
• Do you know what to do if there is a chemical spill?
• Do you know the location of and how to use the emergency eyewash/shower?
• Do you know what Permissible Exposure Limits are and where to locate them for the chemicals you work with?
• Do you know how to recognize the presence or release of the chemicals used in your area?
• Do you know the health hazards associated with the chemicals you use?
• Do you know the signs and symptoms associated with exposure to the chemicals in your lab?
• Do you know the measures (work practices, emergency procedures, Personal Protective Equipment, etc.) you can take to protect yourself from the hazards associated with the chemicals used in your lab?
• Do you know the location of the chemical inventory in your lab?

Trainer/Laboratory Supervisor: ______(print name)

Trainee/Laboratory Personnel: ______ (print name)

_____(signature)

_____(signature)