**ON THE JOB TRAINING RECORD**

Name of employee: Date:

Trainer Name:

**Task to be trained on:**

**Task steps:**

❑ Review of Hazard Assessment ❑ Review of Procedure

❑ Review of PPE ❑ Review of Code of Practice

❑ Review of MSDS ❑ Other documentation reviewed:

❑ ❑

**Trainer has observed the employee:**

❑ Donning appropriate PPE ❑ Following the procedure

❑ Completing any relevant documentation ❑ Other:

I, have completed the training outline above and understand feel I am competent in performing the task.

Employee Signature Date

The employee above has demonstrated that they can perform the task mentioned above in a safe and competent manner.

Trainer Signature Date