## Purdue University Hazard Communication Program

## **Hazard Communication Training Attendance Record**

(Must be updated every fiscal year.)

Trainer (Print or Type Full Name):		
Work Area(s)/Building(s):	DTI:	
Training Location:	Date:	Duration (min.):
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I certify the employees below have been trained according to guidelines, requirements, and approved methods specified in the Purdue University Hazard Communication Program. In addition, they have been familiarized with the location and interpretation of work area SDSs; label hazard warnings, classes, categories, pictograms, signal words, and precautionary statements.

Trainer's Signature:

Full Name		HazCom Online Training			
(Printed)	Signature	Training Module*		Purdue Login	
(())		NA	AT	СТ	(username)

This training record must be kept in the work area's Written Hazard Communication Program.

\* NA- Not Applicable, AT = Awareness Training, CT = Comprehensive Training