ORGANIZATION
NEW EMPLOYEE'S HAZARD COMMUNICATION ORIENTATION AND TRAINING CHECKLIST

Dept: _____ Trainer: _____ Date: _____

___ Introduction to operations where chemical and physical hazards are present – types of hazards encountered**.**
___ Required work practices
___ Personal Protective Equipment
___ Emergency Procedures
___ Detection of Chemical Hazards
___ Location and availability of program and manual
___ Labeling systems
___ Copy of this form to be sent to Installation Safety Office.

Trainees:

EMPLOYEES NAME	SIGNATURE

Copies sent to installation Safety Office. Yes ☐ No ☐