



INDIVIDUAL RECORD OF ASSIGNED PERSONAL PROTECTIVE EQUIPMENT (PPE)

Employee Name: _____

Job Title: _____

Department: _____

Trainer: _____

ASSIGNED PPE	SPECIFICATIONS

Training Date

Topic

_____	Information and training on when to use PPE to protect against workplace hazards.
_____	Information and training on the specific types of PPE available for use.
_____	How to put on, take off, adjust, and wear PPE.
_____	Limitations of PPE provided.
_____	Care, maintenance, useful life and disposal of PPE.

Employee Statement:

I have attended training provided by my employer on the topics and dates listed above and have been given the opportunity to demonstrate my understanding of these topics and to demonstrate my ability to use the personal protective equipment provided to me.

Employee Signature

Date

Employer/Trainer Statement:

I certify that the employee named on this individual record has demonstrated adequate proficiency and understanding of the topics listed above.

Employer/Trainer

Date