

**LABORATORY SAFETY TRAINING
INDIVIDUAL DOCUMENTATION**

Indiana University

Supervisor/PI _____

Phone _____

Department _____

Building/Room # _____

The Occupational Safety and Health Administration (OSHA) under the laboratory safety standard (29 CFR 1910.1450) requires that each laboratory employee be made aware of the location and content of the *Laboratory Safety and Chemical Hygiene Plan*. By signing below, you acknowledge that you have read and understood the contents of this plan and know its location within the laboratory.

The laboratory standard further requires that employees be provided with sufficient safety training which covers the specific topics described in [Section 4.0 Training Requirements](#) of the *Laboratory Safety and Chemical Hygiene Plan*. This training must be provided prior to the time of the employee's initial assignment and whenever there is a significant change in the types or quantities of chemicals used by the employee.

Training and supervision of laboratory specific procedures are provided by the Principal Investigator, lab supervisor, or others that are qualified and authorized by the PI. This form can also be used to document that or any other training provided in the laboratory.

<u>Type of Training</u>	<u>Name (print clearly)</u>	<u>Date</u>	<u>Provided by</u>
_____	_____	_____	_____
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This form should be kept on file in Appendix A of the *Laboratory Safety and Chemical Hygiene Plan*. **Do not** return this form to University Environmental Health and Safety.