



## Safety Training Records

Date:	Supervisor:
Name:	Supervisor email:
Email:	Room & Phone/Ext.:

### Training Completed

Worker Health and Safety Awareness (mandatory)	Date completed:
	Trainer:
WHMIS (online/in-class)	Date completed:
	Trainer:
Laboratory Safety (online/in-class)	Date completed:
	Trainer:
Vehicle	Date completed:
	Trainer:
Animal Handling/Modules	Date completed:
	Trainer:
Autoclave	Date completed:
	Trainer:
Gas Cylinders and Liquid Nitrogen	Date completed:
	Trainer:
Grinding: Plant	Date completed:
	Trainer:
Grinding: Carcass	Date completed:
	Trainer:
Mixer: Marion	Date completed:
	Trainer:
Mixer: Hobart	Date completed:
	Trainer:
Radio-isotope usage	Date completed:
	Trainer:
Other:	Date completed:
	Trainer:



**Please fill in the above and return it to the Department of Animal Biosciences main office in room 144. Ensure that you have made a copy as well.**

You and your supervisor should discuss/complete the following items:

- Tour of the facility; including locations of:
  - o Phones, emergency numbers
  - o First aid kits, and first aid responders
  - o Eye wash stations and showers
  - o Fire extinguishers, spill kits (if applicable)
  - o Emergency procedures for the facility
  - o Research equipment, Standard Operating Principles (SOPs) and/or manuals
  - o Personal Protective Equipment (PPE)
  - o Potable drinking water
  - o Washrooms
  
- Safety Notice board location and its contents:
  - o University Safety Policy
  - o Occupational Health and Safety Act
  - o Violence and harassment prevention policies
  - o Incident Reporting process & forms
  
- **Note:** Please list any additional information below
  - o Specific equipment used:
  - o Research Station Locations:
  - o Animal Species involved: