

OSHA Susan Harwood Safety Training Sign-in Sheet

Trainer:

Company:

Date of Training:

Circle the topics delivered: 1. Confined Space Entry 2. Electrical Safety 3. Ergonomics 4. Excavation 5. Fall protection 6.

Name:	Position/Job Title:	Employer/School:	Years of Experience:	Contact information:
<i>Joe Smith</i>	<i>Laborer, Mechanic, etc.</i>	<i>Moss Mechanical</i>	<i>XX years</i>	<i>Email/phone number</i>
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Name:	Position/Job Title:	Employer/School:	Years of Experience:	Contact information:
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