EMPLOYEE TRAINING DOCUMENTATION*

ON___ /____/____, TRAINING PROVIDED BY:_____
WAS CONDUCTED ON THE FOLLOWING TOPICS:

	TRAINING TOPIC	TRAINING TIME
☐	**Procedures for handling hazardous materials, including hazardous wastes.**	
☐	**Procedures for coordinating with emergency response agencies.**	
☐	**Use of emergency response equipment and materials under the business control.**	
☐	**Emergency Response Plan implementation.**	

THE FOLLOWING PERSONS ATTENDED THE TRAINING SESSION:

NAME	TITLE	SIGNATURE

***Businesses may use this form or any other format that contains the same information to document training for the Hazardous Materials Business Plan.**