



ANNUAL TRAINING AND SAFETY TAILGATE RECORD

/not valid without employee's signature/

Employee Name (print):	
Program:	Total Credit Hours:
Year:	Date Copied to HR:

Signature	Date	Policy	Credit Hours	Trainer Initials
		General Workplace Safety		
		Reporting Injuries		
		Chemical Hazard Communication		
		Bloodborne Pathogens		
		Ergonomics		
		Back Safety & Lifting Tips		
		Slips, Trips and Falls		
		Workplace Violence		
		Crisis Response & Emergency Action Plan		
		Earthquake & Ash		
		Fire Safety		
		Driver Safety		
		Food Safety HACCP		
		Stress Management		
		Disease Prevention & Avian Flu		
		Mandatory Reporting		

I have been trained on the policy as initialed above, received a copy of it, and had an opportunity to ask questions. I understand and will abide by Janus Youth Programs, Inc. expectations.

Employee's Signature: _____ Date: _____

Trainer's Name (print): _____ Trainer's Signature: _____ Date: _____

Trainer's Name (print): _____ Trainer's Signature: _____ Date: _____

****BOLD* Bloodborne Pathogens, Mandatory Reporting, Fire Safety, Earthquake & Ash must be completed annually and copied to HR (Safety) for Staff Personnel file. Completed copy to HR (Safety) and place in Staff Personnel file. Keep record for 3 years in Safety Records Binder.***