

# TAMU HAZARD COMMUNICATION PROGRAM

## WORK AREA SPECIFIC TRAINING

### Department of Chemistry Attendance Record

I hereby acknowledge receipt of the Texas A&M University (TAMU) Hazard Communication Program Work Area Specific Training. My supervisor/employer has provided information regarding:

1. information on hazardous chemicals known to be present in the employee's work area and to which the employee may be exposed, including:
  - A. location within the work area,
  - B. specific hazards, including acute and chronic effects,
  - C. safe handling procedures.
2. work area location of MSDSs, or procedures for obtaining MSDSs;
3. how to obtain and use appropriate personal protective equipment;
4. first aid treatment to be used with respect to hazardous chemicals;
5. instructions on spill cleanup procedures, and proper disposal of hazardous chemicals specific to that work area.

I understand that my department/unit will provide access to chemical information and will provide additional/continuous training as appropriate, regarding hazardous chemicals to which I may be exposed during my employment activities.

Is this individual:  
a TAMU Employee \_\_\_\_\_  
a TAMU Student  
    Grad \_\_\_\_\_ Undergrad \_\_\_\_\_  
an Approved Visiting Scholar \_\_\_\_\_

Is this training for teaching?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_  
If yes,  
Course #: \_\_\_\_\_

Is this training for research?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_

\_\_\_\_\_  
Employee Name (please print)

\_\_\_\_\_  
Instructor Name (please print)

\_\_\_\_\_  
\*Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee UIN

\*The employee is responsible for ensuring that this completed form is given to the Department of Chemistry Personnel Office (Room 122) which maintains the departmental personnel files.