

Training record

Name of company _____

Name of employee _____

Name of supervisor _____

Instructions to supervisor

The employee and supervisor should sign each area of training listed below as it is completed. The manager responsible should endorse the record and ensure that a copy is retained on file.

	Date completed	Employee's signature	Supervisor's signature
1 General responsibilities	_____	_____	_____
2 Accident reporting and recording	_____	_____	_____
3 Health and welfare	_____	_____	_____
4 First aid and emergency procedures	_____	_____	_____
5 Personal protective equipment	_____	_____	_____
6 Asbestos	_____	_____	_____
7 Dust and fumes (Respiratory hazards)	_____	_____	_____
8 Noise and vibration	_____	_____	_____
9 Hazardous substances	_____	_____	_____

Training record *continued*

	Date completed	Employee's signature	Supervisor's signature
10 Manual handling	_____	_____	_____
11 Safety signs	_____	_____	_____
12 Fire prevention and control	_____	_____	_____
13 Electrical safety	_____	_____	_____
14 Work equipment and hand-held tools	_____	_____	_____
15 Mobile work equipment	_____	_____	_____
16 Lifting operations and equipment	_____	_____	_____
17 Working at height	_____	_____	_____
18 Excavations	_____	_____	_____
19 Underground and overhead services	_____	_____	_____
20 Confined spaces	_____	_____	_____
21 Environmental awareness and waste control	_____	_____	_____
22 Demolition	_____	_____	_____
23 Highway works	_____	_____	_____
24 Specialist work at height	_____	_____	_____
25 Lifts and escalators	_____	_____	_____
26 Tunnelling	_____	_____	_____
27 Plumbing (JIB)	_____	_____	_____
28 Heating, ventilation, air conditioning and refrigeration (HVACR)	_____	_____	_____