

EMPLOYEE MSDS REVIEW AND VERIFICATION

As part of the training required in the Chemical Hygiene Plan, I have received information regarding the health and physical hazards of the chemical(s) with which I work. I have reviewed the information on the Material Safety Data Sheet or have had it explained to me and understand the appropriate engineering controls, work practices, and personal protective equipment I must use to work with this chemical safely.

CHEMICAL OR PRODUCT NAME

EMPLOYEE SIGNATURE

DATE
