

**WORKER PROTECTION STANDARD**  
**ACKNOWLEDGEMENT OF WORKER TRAINING**

I hereby acknowledge having received instruction on the safety precautions to be used when working with pesticides and treated areas. The instruction included:

- Hazards of pesticides resulting from toxicity and exposure, including acute effects, chronic effects, effects and sensitization.
- Routes through which pesticides can enter the body.
- Signs and symptoms of common types of pesticide poisonings.
- Emergency first aid for pesticide injuries or poisonings.
- Hazards for chemigation and drift.
- Hazards from pesticides residues on clothing.
- Warning about taking pesticides or pesticide containers home.
- An explanation of the WPS requirements designed to protect workers, including application information and entry restrictions, design of the warning signs, posting of warning signs, oral warning and protection against retaliatory acts. (Includes how each of these subjects will be handled on your establishments).

List of site-specific training topics:

- Where and in what form pesticides may be encountered during work activities on this establishment.
- How to obtain emergency medical care. Including transportation, location and telephone number of the nearest medical facility.
- Routine and emergency decontamination procedures, including emergency eye-flushing techniques and where decontamination sites are located on this establishment.
- Availability of specific information about pesticide applications and where records of these applications are made accessible to the Worker.

I understand that these requirements are established in the Federal Worker Protection Standard Worker Safety Rules, Code of Federal Regulations Title 40 CFR Part 170. I acknowledge receiving "instruction" in the area of worker safety as listed above and in a language that I can understand.

\_\_\_\_\_  
(Printed name of employee being trained)

\_\_\_\_\_  
( Signature of trained employee)

\_\_\_\_\_  
(Date of instruction completed)

\_\_\_\_\_  
(Name of trainer)

\_\_\_\_\_  
(Certified applicator # of trainer)