Certification of Hazard Assessment

For:

Job description

PPE (personal protective equipment) in necessary during the following working conditions or when performing the following tasks:

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The PPE necessary to work in the above conditions are:

# Part of Body Specify exact type

Eye / Face Protection

Respiratory Protection

Hand / Skin Protection

Hearing Protection

Head Protection

Foot Protection

Body Protection

Other Protection

Certified by: Date:

Please sign below that you have been instructed and have demonstrated your ability to:

Adjust and properly wear your PPE

Know the limitations of your PPE, including its useful lifetime

Maintain, store and dispose of your PPE

Employee Name Signature Date

Certified by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_