The Temple University Art Safety Guide requires that all employees complete New Employee safety orientation and site specific training. Any training resource may be used as long as it meets the requirements of the Art Safety guide and the employee’s department.

### Topics for Employee Site-Specific Training and Information Provided by the Department/Lab/Center.

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- Employee has read, knows how to access, and knows the location of the Art Safety Guide and the EHRS handbook.
- Employee knows location of a how to quickly access SDS for Material used in the area.
- Employee has been notified if supervisory approval is needed before Using certain hazardous chemicals.
- Employee has reviewed and understands the areas SOPs or specific safe Work practices.
- Employee has been made aware that, if new hazards are introduced into the lab, additional training pertaining to the hazard will be required of him/her.
- Employee has received training on the signs and symptoms associated with exposure to hazardous chemicals used in the area.
- Employee has been instructed of any Permissible Exposure Limits or other pertinent exposure limits that apply to the lab.
- Employee has been trained on methods used to detect the presence or release of hazardous chemicals in the area.
- Employee knows the correct use of fume hoods, booths, ventilation systems, chemical storage cabinets, refrigerators, and other equipment and engineering controls specific to the area.
- Employee has received instruction on the types of personnel protective equipment (PPE) that are required for specific task and knows how to obtain, properly use and maintain them.
- Employee knows the location and how to use emergency eyewash and emergency showers.
- Employee knows how to handle and dispose of chemical waste according to the TU waste guide.
- Employee has reviewed the spill response procedures and knows what to do in case of a lab emergency including spill kit location and use, emergency contact list, and incident reporting procedures.

### Verification of training

- I certify that the site-specific training items, where applicable, were reviewed and understood.

  **Employee Name:** __________________________  **Date:** __________________________

  **Employee Signature:** __________________________

  **Supervisor/Trainer Name:** __________________________  **Date:** __________________________

  **Signature:** __________________________

**NOTE: The Department must keep this form to meet recordkeeping requirements.**