# SAFETY TRAINING LOG

I certify that the employee listed below received Safety Training in the subject(s) as indicated.

Department _____ Date of Training _____

Subjects(s) _____

Title(s) of Film(s), video(s) or slide presentation(s) shown to employee:

_____

☐ Attached is an outline of the specific items discussed in this training program, along with sample handouts, if any.

Instructor's Name (Please Print) _____

Signature _____ Date _____
(Instructor)

| Employee Name (Please Print) | Employee Signature |
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# SEXUAL HARASSMENT PREVENTION TRAINING

I certify that the employees listed below received Sexual Harassment Prevention Training as indicated.

Company _____ Department _____

☐ Attached is an outline of this training program, along with sample handouts, if any.

Instructor's Name (Please Print) _____

Signature (Instructor) _____ Date _____

| Employee Name (Please Print) | Employee Signature |
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*Courtesy* Pacific Employers