

Appendix C1

HAZARD COMMUNICATION TRAINING CERTIFICATION

I, Corey Jones, received Hazard Communication Training, as described within the Hazard Communication Program. The training was conducted on: 11/5/18.

Employee Signature	Social Security Number	Work Area
<u>Corey Jones</u>	<u>XXXXXXXX8227</u>	<u>SUPERVISOR</u>

I hereby certify that the above named employee has been provided with Hazard Communication Training on: 11/5/18.

Instructor's Signature [Signature]