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(employer name - stamp)

INITIAL TRAINING CARD IN WORK SAFETY AND HEALTH

1. Name and surname of trainee	
2. Organisational unit name	
3. General training	General training was conducted on (date) (name and surname of trainer) (signature of trainee*)
4. Job position training	1) Job position training for the position of was conducted during (date) by (name and surname of trainer) Having undergone a test of knowledge and skills of performing work in accordance with the rules and principles of work safety and health, Mr/Mrs/Miss has been authorised to perform work in the position of (signature of trainee*) (date and signature of organisational unit superior)
	2**) Job position training for the position of was conducted during (date) by (name and surname of trainer) Having undergone a test of knowledge and skills of performing work in accordance with the rules and principles of work safety and health, Mr/Mrs/Miss has been authorised to perform work in the position of (signature of trainee*) (date and signature of organisational unit superior)

* The signature serves as proof of undergoing training and knowledge and acceptance of regulations and principles of work safety and health concerning the work performed.

** Complete in cases stipulated in § 11 section 1 pt. 2 and section 2 and 3 of the Ordinance of the Minister of Economy and Labour dated 27 July 2004 concerning work safety and health training.



szkolenia i nadzór bhp, ocena ryzyka zawodowego,
kompleksowa obsługa przedsiębiorstw

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