

PESTICIDE SAFETY TRAINING RECORD

NAME Tiffany Anderson
 NAME OF EMPLOYER 306
 ASSIGNED JOB DUTIES: Applicator, mixer, etc.

SAFE PROCEDURES: Pouring, lifting, opening, operating equipment, etc.	X	X	X	X	X	X	X	X	X	X	X
PROTECTIVE CLOTHING & EQUIPMENT: Coveralls, gloves, goggles, boots, respirator, apron, etc.	X	X	X	X	X	X	X	X	X	X	X
REPORT IMMEDIATELY SYMPTOMS OF POISONING: Pinpoint, pupils, nausea, shortness of breath, dizziness, headache, blurred vision.											
WASH HANDS AND ARMS WITH SOAP & WATER: Before eating, drinking, smoking, going to the restroom.	X	X	X	X	X	X	X	X	X	X	X
WASH COMPLETELY at the end of work day, change into clean clothing.	X	X	X	X	X	X	X	X	X	X	X
WEAR CLEAN WORK CLOTHES DAILY.											
EMERGENCY MEDICAL INFORMATION: Name, address, phone number of clinic, physician, or hospital emergency room & where information is located.	X	X	X	X	X	X	X	X	X	X	X
MEDICAL SUPERVISION: Required when working more than 30 hrs. in 30 days with carbamates, organophosphates with "DANGER" or "WARNING" on label.											
READ THE LABEL: Signal word, precautions, first aid, rate, dilution, volume.	X	X	X	X	X	X	X	X	X	X	X
TRIPLE RINSE THE CANS AT THE TIME OF USE.	X	X	X	X	X	X	X	X	X	X	X
DRIFT: Confine the spray to the crop, watch out for people, animals, waterways, or any special hazards.	X	X	X	X	X	X	X	X	X	X	X
STORAGE of pesticide cans in a locked and posted area or with an authorized person watching the cans.	X	X	X	X	X	X	X	X	X	X	X
PESTICIDE SAFETY INFORMATION SERIES	X	X	X	X	X	X	X	X	X	X	X

EMPLOYEE INITIALS	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
DATE - MO/DAY/YR	8-31-10	8-31	8-31	8-31	8-31	8-31	8-31	8-31	8-31	8-31	8-31
PESTICIDE CATEGORY	3	3	3	3	3	3	3	3	3	3	3

EMPLOYEE SIGNATURE [Signature]
 DATE OF INITIAL TRAINING 8-31-2010

Training Initial

PESTICIDES											
AQUA MASTER	ROUND UP PRO	IN-PLACE	R-11	SUSPEND	PYRENONE CROP SPRAY	MIGK 73916	EVERGREEN 60-6	GARLON 4 ULTRA	RYCONYL 52.5	Agilabac XT	Montney Crop Oil
BH	BH	BH	BH	BH	BH	BH	BH	BH	BH	BH	BH