

PESTICIDE SAFETY TRAINING RECORD

NAME Tiffany Anderson  
 NAME OF EMPLOYER SJCMVC O  
 ASSIGNED JOB DUTIES: applicator  
Applicator, mixer, etc.

SAFE PROCEDURES: Pouring, lifting, opening, operating equipment, etc.	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
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
WASH COMPLETELY at the end of work day, change into clean clothing.	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
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
TRIPLE RINSE THE CANS AT THE TIME OF USE.	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
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
PESTICIDE SAFETY INFORMATION SERIES										

EMPLOYEE INITIALS TA TA TA TA TA TA TA TA TA TA TA  
 DATE - MO/DAY/YR 3-28-06  
 PESTICIDE CATEGORY 3

EMPLOYEE SIGNATURE Tiffany Anderson  
 DATE OF INITIAL TRAINING \_\_\_\_\_

Training Initial  
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PESTICIDES										
AQUAMASTER	ROUND-UP PRO	IN-PLACE	R-11	SUSPEND	PYRENONE CROP SPRAY	<del>MGBK-7396</del>	SCOURGE	FYFARON	GARLON 4	MORACT

↑ MGBK-7396