

FIELDWORKER SAFETY TRAINING RECORD

NAME OF EMPLOYER: _____ **DATE:** _____

NAME OF TRAINER: _____

TRAINER'S QUALIFICATION: _____

Symptoms of poisoning: Pinpoint pupils, nausea shortness of breath, dizziness, blurred vision. Ways poisoning or injury can occur.	Location of pesticide safety information series (PSIS Material safety data sheets (MSDS), pesticides use Reports, safety posters, and restricted entry intervals.
Wash hands and arms with soap and water: Before eating drinking, smoking, or going to the bathroom Emergency Eye flushing techniques.	The need for immediate decontamination of skin and Eyes when exposure occurs.
Wash completely at the end of the work day, change into clean clothing.	Employee's rights: against discharge, discrimination, Rights to receive information.
Wear clean work clothing daily. Be aware of pesticide residues on clothing.	Routes through which pesticides enter the body.
Understanding the immediate and long term hazards involved In handling pesticides. Known or suspected chronic and acute effects.	Prevention, recognition, and first aid treatment of Heat related illness.
Emergency medical information: Name, address, phone number of clinic, physician, or hospital emergency room and where the Information is located.	Restricted entry intervals and posting. Do not enter treated areas.
Never take home pesticide containers used at work.	

Print Your Name

Sign Your Name

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