**Penn State University**

**Worker Protection Standard**

**Acknowledgement of Worker Training**

I hereby acknowledge having received instruction on the safety precautions to be used as a worker in areas which have been treated with pesticides. I understand that these requirements are established in the Federal Worker Protection Standard Worker Safety Rules, Code of Federal Regulations Title 40 CFR Part 170. I acknowledge receiving instruction in the area of worker safety as listed above and in a language that I can understand.

Name (Last, First, Middle) Signature

Date PSU ID#

College/Unit Department/Division

Trainer and Trainer Certified Applicator # Worker’s Supervisor

EPA Approved Training Materials