

**CERTIFICATE OF THE RIGHT TO KNOW**

This is to certify that I, \_\_\_\_\_, have been briefed on the Right To Know in regards to Hazardous Substances and have received instructions covering the following:

- The identification of chemicals in use.
- The location of the substance in the work place and department.
- Proper and safe handling practices.
- First Aid and antidote treatment.
- Adverse health effects.
- Appropriate emergency procedures including who to contact.
- Procedures for clean-up of leaks or spills.
- Potential for flammability, explosion, and reactivity.
- Use of correct protective equipment.
- Location of hazardous substance list and MSDS.

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Name (Print)

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Employee #

My signature acknowledges that I have reviewed, understand and agree to comply with the education and/or policies and procedures indicated.

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Signature

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Date

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Director Signature

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Date