Internal Training Record

If hazards are high or complex, or personnel have limited prior experience or training, then hands-on training should be provided on the contents of an SOP. For convenience, the training may be documented using this form, although PIs are free to keep internal training records in other formats if desired. Training may be conducted by the PI, or the PI may delegate a suitably experienced and knowledgeable lab member (e.g. lab manager or senior postdoc) as the trainer. If delegated, the PI still retains management responsibility for the quality and adequacy of the safety training.

|  |  |  |  |
| --- | --- | --- | --- |
| Trainer name |  | Trainer position |  |
| Trainer USC ID |  | Trainer email |  |
| Trainee #1 name |  | Trainee #1 USC ID |  |
| Trainee #1 email |  | Trainee #1 signature |  |
| Trainee #2 name |  | Trainee #2 USC ID |  |
| Trainee #2 email |  | Trainee #2 signature |  |
| Trainee #3 name |  | Trainee #3 USC ID |  |
| Trainee #3 email |  | Trainee #3 signature |  |
| Trainee #4 name\* |  | Trainee #4 signature |  |
| Trainee #4 email |  | Trainee #4 USC ID |  |
| Date training started |  | Date training completed |  |
| Type of training (delete as appropriate) | **Initial training**  **Refresher training** | Type of training (delete as appropriate) | **Classroom training**  **Hands-on laboratory training** |
| If refresher training, provide date of initial training |  | If refresher training, was the initial training hands-on in the lab? | **YES 🞏 NO 🞏** |
| Signature of trainer confirming the above named trainees have successfully completed safety training on the contents of this SOP (and any additional subjects listed below) | |  | |
| Date of signing by trainer | |  | |
| Additional subjects covered by safety training |  | | |
| \* If there are more than four trainees, please append an additional sign-in sheet. | | | |