

Farm Safety Management Plan

Employee Training Verification Form

Name of Farm:

Mr./Ms. _____ a newly hired worker, was trained verbally on farm safety and was given written information of which a copy is on file on ____/____/____ and this is verified by _____ (Trainee, please sign)

The farm safety instructor is Mr./Ms _____ for the above farm.

Any questions about safety issues on this farm will be handled by _____

Trainee verification _____

Instructor verification _____

This document acknowledges that training was conducted as specified.