
EMPLOYEE ACKNOWLEDGMENT

Employee Name: _____ Date: _____

I hereby certify that I have been informed and instructed on the policies and procedures of the Company's written Safety Program, and that I have received a copy of the Company's Safety Program booklet, including related reports and forms. I also understand that I am to immediately report any incidents of near miss accidents or actual injuries to my supervisor.

I have also reviewed copies of Material Safety Data Sheets (MSDS) for each chemical cleaning product which I may use in connection with my job with the company.

I have been instructed in the safe use of the vacuum cleaners I will be using on my job, and in the safe use and storage of all cleaning tools and equipment.

I understand that the use of ladders on the job is discouraged, and that I am not to lean over balconies or out of windows.

I have reviewed the contents and been informed on the use of first aid kits contained in the First Aid Kit which must be kept in whichever vehicle is used for transporting employees to, from and between cleaning assignments each day. I have read the First Aid Guide contained in the First Aid Kit.

I acknowledge being instructed in the use of both fire extinguishers and emergency flares which are required to be in the trunk of the vehicle in use for transporting the team.

I have been given a list of Emergency Telephone Numbers in case of an accident or emergency.

I have been offered back brace support and rubber (or disposable non-surgical) gloves, and instructed on their appropriate uses.

I have reviewed the following posters displayed at the company's offices.

FEDERALLY REQUIRED POSTERS AND NOTICES

- | | |
|---|--|
| <input type="checkbox"/> Equal Opportunity Poster | <input type="checkbox"/> Federal Minimum Wage Poster |
| <input type="checkbox"/> Occupational Safety and Health Act (OSHA) Poster | <input type="checkbox"/> Employee Polygraph Poster |

STATE REQUIRED POSTERS AND NOTICES (if applicable):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Employee's Signature: _____ Date: _____