EMPLOYEE TRAINING RECORD			
TRAINING TITLE: PPE Inspection			
INSPECTION CRITERIA	RESULTS OF INSPECTION		REMARKS
	ACCEPTABLE	NON-ACCEPTABLE	
Hard Hat			
Safety Glasses			
Face Shield			
Respirator			
Gloves			
Safety Boots/Shoes			
Rubber Boots			
Rainwear			
Reflective Vest			

EMPLOYEE'S NAME	EMPLOYEE'S SIGNATURE	DATE
INSTRUCTOR'S NAME	INSTRUCTOR'S SIGNATURE	DATE