

# Personal Protective Equipment Usage Training Record

Employee Name:

Department:

Trainer Name:

Date:

## PPE Training Topics Covered

PPE Type/Topic	Description	Trained ("")	Trainer Initials
Head Protection	Proper use and care of helmets, hard hats		
Eye & Face Protection	Goggles, face shields usage and limitations		
Hearing Protection	Ear plugs, earmuffs use		
Respiratory Protection	Masks, respirator fitting, maintenance		
Hand Protection	Selection and usage of gloves		
Foot Protection	Safety shoes, boots precautions		
Body Protection	High-visibility vests, aprons, suits		
Fall Protection	Harnesses, lanyards, anchor points		

## Employee Acknowledgment

I acknowledge that I have received and understood the training in the use, care, and limitations of the personal protective equipment indicated above.

Employee Signature:		Date:	
Trainer Signature:		Date:	