

FIELD RESEARCH TRAINING CHECKLIST

Trainee Name:	TU ID #:	Job Title:
Supervisor/Designated Trainer Name:	TU ID #:	Department:

TRAINING

All field researchers must be trained on the hazards and required controls associated with their work activities and field environment by the principal investigator (PI), Instructor, or designee.

	Reviewed and provided a copy of the Field Hazard Assessment.
	Instructed on the nature and scope of the field work.
	Instructed on the specific procedures to be performed in the field.
	Instructed on any recommended medical evaluations and/or immunizations.
	Reviewed and provided a copy of all applicable Standard Operating Procedures (SOP's) and relevant safety and health information, manuals, and guides.
	Successfully completed all required trainings identified by the Principal Investigator. Examples include but not limited to: <ul style="list-style-type: none"> • Standard First Aid/CPR • Wilderness First Aid • Bloodborne Pathogens • Respiratory Protection • Other (Indicate):
	Instructed on the use, maintenance, limitations, removal, decontamination, and disposal of Personal Protective Equipment (PPE) that will be provided for field work: <ul style="list-style-type: none"> • Indicate required PPE:
	Instructed on any restrictions regarding permitting and site access.
	Trained on the use, maintenance and care of mechanical equipment and other required gear.
	Reviewed the disposal plan for waste generated in the field.
	Informed that if a new hazard is introduced into the field work, additional training may be required.
	Instructed on the correct use of emergency safety equipment and supplies.
	Reviewed incident reporting procedures.
	Instructed on defined circumstances when, and how the itinerary can be changed due to safety concerns.

ADDITIONAL SPECIFIC TRAINING

Use this section for any additional safety training topics required:

VERIFICATION OF TRAINING: I verify that the Field Work training items/topics were reviewed and understood.

Trainee Signature:	Date:
Supervisor/Designated Trainer Signature:	Date:

THE PI AND/OR INSTRUCTOR MUST MAINTAIN A COPY OF THIS RECORD