	Worker Protection Standard Training
Date of Training	The trainer listed below hereby affirms that the trainee has completed the specified training as required by the Federal Worker Protection Standard.
Employee Signature	
	Trainer Name:
Trainer Signature EPA approval number for training materials:	Employee Name:
	Worker training / Handler training (circle one)

Employer:	Trainer Qualification(s):
Type of Training Provided: Worker Handler EPA Approval Number of Materials Used:	 State Designated Trainer Trained Train the Trainer for Workers Trained Train the Trainer for Handlers Certified Private or Commercial Applicator Certificate #: Issuing State: Expiration Date: Documentation of the trainer's qualifications is on file with the employer and can be requested from the employer if not provided with this card. Certification can be verified with the issuing state.

Employer:	Trainer Qualification(s):
Type of Training Provided: Worker Handler EPA Approval Number of Materials Used:	 State Designated Trainer Trained Train the Trainer for Workers Trained Train the Trainer for Handlers Certified Private or Commercial Applicator Certificate #: Issuing State: Expiration Date: Documentation of the trainer's qualifications is on file with the employer and can be requested from the employer if not provided with this card. Certification can be verified with the issuing state.