



## Acknowledgement of Safety Training

I ACKNOWLEDGE THAT I HAVE RECEIVED THE SAFETY TRAINING FORM FROM BLOOMFIELD HILLS AS OUTLINED BELOW.

**I HAVE VIEWED THE FOLLOWING ONLINE TRAINING VIDEOS:**

BLOODBORNE PATHOGENS - HEP B FORM MUST ALSO BE COMPLETED (mandatory)

SECLUSION AND RESTRAINT (mandatory)

EPI-PEN

AED

HAZARDOUS COMMUNICATION/MATERIAL SAFETY DATA SHEETS

OTHER: \_\_\_\_\_

**DATE OF TRAINING:** \_\_\_\_\_

**NAME OF EMPLOYEE:** \_\_\_\_\_

**SIGNATURE OF EMPLOYEE:** \_\_\_\_\_