An employer must be able to verify that the serviceman training has been given and that it has conformed to the criteria established by ODA. The bottom part of this page may be used for this purpose. The trained serviceman should fill out and sign the form. It can then be detached and held in the employee's personnel file for future reference.

Employee name  
(please print)  
Tashito Adams

- By signing this form, I attest that I have been given basic pesticide safety training.

- This training covered all criteria as outlined in the introduction to the Ohio Department of Agriculture publication, "Safety Training Guide for Trained Servicemen".

- This training was given prior to my first occupational exposure to pesticides for this employer. (In the case of an existing employee, the training was given during the grace period established by the Ohio Department of Agriculture.)

Training Resource (check one or more)

- ODA's "Safety Training Guide for Trained Servicemen"

- USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

- Other materials developed by employer

Employee Signature  
Tashito Adams

Date 7-10-2017

Supervisor Signature  

Verification of the serviceman training for non-licensed applicators.
An employer must be able to verify that the serviceman training has been given and that it has conformed to the criteria established by ODA. The bottom part of this page may be used for this purpose. The trained serviceman should fill out and sign the form. It can then be detached and held in the employee's personnel file for future reference.

Employee name  Marcus Cooper
(please print)

-By signing this form, I attest that I have been given basic pesticide safety training.

-This training covered all criteria as outlined in the introduction to the Ohio Department of Agriculture publication, "Safety Training Guide for Trained Servicemen".

-This training was given prior to my first occupational exposure to pesticides for this employer. (In the case of an existing employee, the training was given during the grace period established by the Ohio Department of Agriculture.)

Training Resource (check one or more)

_____ ODA's "Safety Training Guide for Trained Servicemen"

_____ USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

_____ Other materials developed by employer

Employee Signature  Marcus Cooper  Date 4-27-15

Supervisor Signature  [Signature]
An employer must be able to verify that the serviceman training has been given and that it has conformed to the criteria established by ODA. The bottom part of this page may be used for this purpose. The trained serviceman should fill out and sign the form. It can then be detached and held in the employee's personnel file for future reference.

Employee name Walter Ray Winhever
(please print)

- By signing this form, I attest that I have been given basic pesticide safety training.

- This training covered all criteria as outlined in the introduction to the Ohio Department of Agriculture publication, "Safety Training Guide for Trained Servicemen".

- This training was given prior to my first occupational exposure to pesticides for this employer. (In the case of an existing employee, the training was given during the grace period established by the Ohio Department of Agriculture.)

Training Resource (check one or more)

[ ] ODA's "Safety Training Guide for Trained Servicemen"

[ ] USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

[ ] Other materials developed by employer

Employee Signature Walter Ray Winhever Date 4/10/15

Supervisor Signature
An employer must be able to verify that the serviceman training has been given and that it has conformed to the criteria established by ODA. The bottom part of this page may be used for this purpose. The trained serviceman should fill out and sign the form. It can then be detached and held in the employee's personnel file for future reference.

Employee name ___________________________
(please print)

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- This training was given prior to my first occupational exposure to pesticides for this employer. (In the case of an existing employee, the training was given during the grace period established by the Ohio Department of Agriculture.)

Training Resource (check one or more)

☐ ODA's "Safety Training Guide for Trained Servicemen"

☐ USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

☐ Other materials developed by employer

Employee Signature ___________________________ Date 4-10-15

Supervisor Signature ___________________________
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Employee name  Nathaniel Fanning

(please print)

- By signing this form, I attest that I have been given basic pesticide safety training.

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Training Resource (check one or more)

____ ODA's "Safety Training Guide for Trained Servicemen"

____ USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

____ Other materials developed by employer

Employee Signature _______________________________ Date 4/10/15

Supervisor Signature _______________________________
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Employee name

(please print)

Larry

Quincy Jr.

- By signing this form, I attest that I have been given basic pesticide safety training.

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- This training was given prior to my first occupational exposure to pesticides for this employer. (In the case of an existing employee, the training was given during the grace period established by the Ohio Department of Agriculture.)

Training Resource (check one or more)

_____ ODA's "Safety Training Guide for Trained Servicemen"

_____ USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

_____ Other materials developed by employer

Employee Signature

Larry Quincy Jr.

Date

4-24-2015

Supervisor Signature

[Signature]

[Signature]
An employer must be able to verify that the serviceman training has been given and that it has conformed to the criteria established by ODA. The bottom part of this page may be used for this purpose. The trained serviceman should fill out and sign the form. It can then be detached and held in the employee's personnel file for future reference.

Employee name ____________________________
(please print)

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- This training was given prior to my first occupational exposure to pesticides for this employer. (In the case of an existing employee, the training was given during the grace period established by the Ohio Department of Agriculture.)

**Training Resource (check one or more)**

[ ] ODA's "Safety Training Guide for Trained Servicemen"

[ ] USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

[ ] Other materials developed by employer

Employee Signature ____________________________ Date 4/10/15

Supervisor Signature ____________________________
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Employee name  

(please print)

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- This training was given prior to my first occupational exposure to pesticides for this employer. (In the case of an existing employee, the training was given during the grace period established by the Ohio Department of Agriculture.)

Training Resource (check one or more)

✓ ODA's "Safety Training Guide for Trained Servicemen"

✓ USEPA agricultural handler manual, "Protect Yourself from Pesticides - Guide for Pesticide Handlers"

✓ Other materials developed by employer

Employee Signature

Date 4/10/15

Supervisor Signature