Certification Form

Date: ________________

Person to be Certified: ________________________________

Tool: _______________________________________________

Trained By: ________________________________________(Must be different than SU certifier)

SMFL Checklist:

☐ Potential User has current safety badge (Do not turn this in if user does not have safety badge)
☐ Potential User has chemical badge – for wet bench certifications

☐ Potential User satisfies tool checklist
  o Personal Safety Hazards
  o Tool Hazards
  o Tool Operation
  o Recovery From Simple Errors
  o Understanding of Process
  o Understanding of appropriate use of tool

☐ Review of safety equipment locations and fire exits

Signatures

Potential User: ________________________________

Email: _________________________________________

SMFL Certifier: ________________________________

Return completed forms to T. Grimsley – 17-2511