

**Penn State University  
Worker Protection Standard  
Acknowledgement of Handler Training**

I hereby acknowledge having received instruction on the safety precautions to be used when working with pesticides and treated areas. The instruction included:

1. Hazards of pesticides resulting from toxicity and exposure, including acute and chronic effects, delayed effects, and sensitization
2. Routes through which pesticides can enter the body
3. Signs and symptoms of common types of pesticide poisoning
4. Emergency first aid for pesticide injuries or poisonings
5. Hazards from chemigation and drift
6. Hazards from pesticide residues on clothing
7. Warnings about taking pesticides and pesticide containers home
8. An explanation of the Worker Protection Standard requirements designed to protect workers, including application information and entry restrictions, design of the warning signs, posting of warning signs, oral warnings, and the protection against retaliatory acts. (Includes how each of these subjects will be handled at Penn State University)
9. Format and meaning of info on pesticide labels including safety info such as precautionary statements about human health hazards
10. Environmental concerns such as drift, runoff, and wildlife hazards
11. Need for an appropriate use of personal protective equipment (PPE)
12. Prevention, recognition, and first aid treatment of heat-related illness
13. Safety requirements for handling, transportation, storing, and disposing of pesticides, including general procedures for spill cleanup

List of site-specific training topics:

1. Where and in what form pesticides may be encountered during work activities at this facility
2. How to obtain emergency medical care including transportation location and telephone number of the nearest medical facility
3. Routine and emergency decontamination procedures, including emergency eye flushing techniques and where decontamination supplies are located at this facility
4. Availability of specific information about pesticide applications and where records of these applications are made accessible to the worker

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I understand that these requirements are established in the Federal Worker Protection Standard Worker Safety Rules, Code of Federal Regulations Title 40 CFR Part 170. I acknowledge receiving instruction in the area of worker safety as listed above and in a language that I can understand.

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Name (Last, First, Middle)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
PSU ID#

\_\_\_\_\_  
College/Unit

\_\_\_\_\_  
Department/Division

\_\_\_\_\_  
Trainer and Trainer Certified Applicator #

\_\_\_\_\_  
Handler's Supervisor