

Hydrofluoric Acid (HF) CERTIFICATION OF TRAINING

Name of person trained:

MOHAMMAD MITJUM

(please print - first name first)

Date:

10/14/22
09/1/22

Duration of training:

2

hours

Classification:

☐

Undergraduate Student

☐

Full time Staff

☐

Visiting Faculty

☒

Graduate Student

☐

Part Time Staff

☐

Visiting Researcher

☐

Postdoctoral Researcher

☐

Faculty

☐

Other

Supervisor:

MARISA TREMBLAY

(printed name - this can be your immediate supervisor)

I certify that I have received and understand the following training:

☒

I have read and understood the appropriate hydrofluoric acid SDS or MSDS

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I have completed the web site training module for HF

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I understand the first aid treatment for exposure and the need for immediate medical treatment

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I understand the PPE requirements for all tasks involving hydrofluoric acid in my work area

☒

I have read the hazard assessments and SOPs for work with hydrofluoric acid in my area

☒

I understand that exposure to hydrofluoric acid is a life threatening event

☒

I certify that safe procedures for use of hydrofluoric acid have been demonstrated by my supervisor

CERTIFICATION:

I certify that I have received the training shown above, and understand how to safely use hydrofluoric acid

Signed TRAINEE:

[Signature]

I certify that the trainee has received the training indicated and has demonstrated his/her ability to safely use hydrofluoric acid

Training assessment has been accomplished by means of:

☒

A written test

☒

Observation of trainee performing tasks

Signed SUPERVISOR:

[Signature]

Put signed copy of this form in Ken Mueller's mailbox in PRIME Lab.