The following record refers to:

*(name, surname, badge nr. or Fiscal Code)*  ,

hereinafter referred to as “the Worker”.

*Responsible for the activity:*

*Date:* …………………………..

**Personal Protective Equipments (PPEs): Choice, Delivery, Information and Training**

 ** applicable  not applicable**

On the basis of:

* the activities carried out at the *(name of the Laboratory)*

of the Industrial Engineering Department,

* the risk assessment of these activities,
* the considerations of the Head of the Health and Safety Office of the University of Bologna,

the Worker received on *(date)* ……………….. following Personal Protective Equipments (PPEs):

* disposable protection gloves: *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* protection gloves: *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* respiratory protector: filtering half-mask / mask *(type and model)*

 with filters *(type and model)*

 PPE category:  3rd category

* respiratory protector: disposable filtering half-mask *(type and model)*

  R – reusable  NR – not-reusable; number of items:

 PPE category:  3rd category

* hearing protectors: earplugs / banded earplugs *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* hearing protectors: ear muffs *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* face shield: *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* eye protector: safety glasses *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* eye protector: safety goggles *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* helmet: *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* safety shoes / safety boots: *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* protective clothing: *(type and model)*

 PPE category:  1st category  2nd category  3rd category

* other: *(type and model)*

 PPE category:  1st category  2nd category  3rd category

The Worker has been informed about the need to wear assigned PPEs and the risks from which these PPEs protect him/her.

The Worker has been also informed about and trained on the correct use, preservation and disposal of these PPEs and about the availability and location of disposable PPEs.

**In the case of 3rd category PPEs or hearing protectors, training is mandatory.**

 ***Responsible for the delivery of the PPEs*** *(Responsible for the activity or others):*

 *(name and function):*

 *signature ……………………………………...*

**Laboratory General Procedures: Information and Training**

 ** applicable  not applicable**

The Worker has been informed about and trained on *(list and mark the required procedures)*:

* the correct handling, storage and disposal of chemical products;
* the waste management procedure;
* other:

 ***Responsible for this task*** *(Responsible for the activity or others):*

 *(name and function):*

 *signature ………………………………………*

**Activity Specific Procedures: Information and Training**

 ** applicable  not applicable**

The Worker has been informed about and trained on the following specific procedure with reference to the activities he/she must carry out *( list and mark the required procedures)*:

* procedure: *(nr./code/name)*

 ***Responsible for the activity:***

 *(name and function):*

 *signature ………………………………………*

**Acknowledgement Declaration of the Worker**

According to the provisions of the article 20 of the Legislative Decree 81/08, the Worker has been provided with following information.

1. Each worker, in accordance with the received training and the instructions and means provided *[by the Employer]* by the Department, must take care of his/her own safety and health and that of other people who may be present in the workplace and who may be affected by his/her actions and omissions.
2. Every worker must in particular:
	1. *[…];*
	2. comply with the provisions and follow the instructions given *[by the Employer and other managers]* by the Director of the Department, by the Responsible for the activity or by the on-site safety reference person, with the aim to protect every worker in the workplace (personal and collective protection);
	3. properly use work equipments, dangerous substances and products, *[“vehicles”: not pertinent]*, and safety equipments;
	4. properly use the necessary personal protective equipments;
	5. report immediately *[to the Employer and other managers and responsibles]* to the Director of the Department, to the Responsible for the activity, to the on-site safety reference person and to the activity supervisor any lack of means of protection or of protective equipments, with reference to points c) and d), and all hazardous conditions to his/her knowledge *[…];*
	6. not remove or modify safety, signal or control equipments;
	7. *[…].*

By signing this form, the Worker, as identified above, declares that he/she:

* understood the reported provisions related to the art. 20 of the Legislative Decree 81/08 “Worker Obligations”;
* received the PPEs, as listed above, has been informed about the risks from which these PPEs protect him/her and the need to use them;
* has been informed about and trained on the location, the necessity to use, the correct use, preservation and disposal of the PPEs provided by the Department;
* has been informed about and trained on the required procedures (“Laboratory general procedures” and “Activity specific procedures”).

 ***The Worker:*** *(signature) ………………………………………*