# Unit Name

## Training Requirements for Staff, Students, and Employees

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| --- | --- | --- | --- | --- |
| Name: |  | Academic Year: |  |  |
| Position: |  | Supervisor: |  |

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| --- | --- | --- | --- | --- | --- |
| **Type of Training** | **Frequency** |  | **Date Taken** |  | **Expiration Date** |
| Annual Basic Safety Training | Annually |  |  |  |  |
| Department Annual Safety Training | Annually |  |  |  |  |
| Emergency Action Plan | Annually |  |  |  |  |
| Mandatory Information Security Training | Annually |  |  |  |  |
| Computer Workstations | Annually |  |  |  |  |
| Animal Use and Care Training | Prior to Use |  |  |  |  |
| Chemical Hygiene (lab safety) | Prior to Use |  |  |  |  |
| [Add additional trainings] |  |  |  |  |  |
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