RESPIRATOR TRAINING CERTIFICATION

I certify that I have been trained in the proper use and limitations of the respirator issued to me. The training included the following:

1. Instruction on how to put on the respirator; its proper fit; how to test the face-to-mask seal (positive and negative pressure fit-check); and how to wear the respirator while I work.

2. Instruction on how to inspect, clean, maintain the respirator in proper working condition, and how to properly store it.

3. Explanation of the dangers related to the misuse of a respirator.

4. Instructions on emergency situations.

I further certify that I understand the use, care, and inspection of the respirator and have tested and worn it.

Type of respirator I was trained to use:

Model of Respirator I was trained to use:

Manufacturer of the Respirator:

Name of person conducting the training: _____

Date of Training:

Employee's Signature

Date

Training Provider Name and Signature

Date

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