

AUTOMOTIVE DEVELOPMENT CENTRE (P21)



OCCUPATIONAL SAFETY COMPLIANCE FORM (DOC. NO.: WF/01/adc-02-1)

DATE :	DURATION/TIME :		
COURSE / SUBJECT :	PPE, EQUIPMENT& M	IACHINERY :	
PURPOSE :			
SUPERVISOR :			
NAME	STAFF/MATRIC NO.	SIGNATURE	CONTACT NO.
1. I have been briefed on the s	safety procedures by the supervisor	r/research office	er/asst. engineer.

- 2. I have been given a demonstration on the operation of equipment and machinery to be used with the correct methods and safety procedures.
- 3. I have been provided with all of the personal protective equipment (PPE) required for my laboratory work.
- 4. I will remain vigilant and cautious over the potential hazards while working in a laboratory.
- 5. I will always make sure that the work activities will be done without endangering myself and others around me.
- 6. I will always practice safe and ethical work culture within the environmental requirements.
- 7. I will always seek advice and services from the staff/officer in charge whenever necessary.
- 8. I will inform the staff/officer in charge in the event where there is/are potential problem/s while working in the laboratory.
- 9. I am fully understood and agreed with all of the procedures that have been outlined and will follow them while working in the laboratory.
- 10. Any injury / ies and/ or accident /s on myself or others because of negligence, it is my responsibility.

OFFICE / LABORATORY USE

1. In accordance with the requirements of the **OSH Act, 1994**, all the information and requirements in accordance with article 1-10 above have been met.

Approved By

2. All safety-related procedures and guidelines have been adopted and implemented.

Supervisor Signature & Stamp

supervisor signature to stamp,	ripproved by,
Date:	Date
Date.	Date