

## **CERTIFICATE SAFETY TRAINING SIGN IN SHEET**

I hereby certify that I have watched and understood the training video titled with the purpose of preventing accidents at work and reinforcing the Safety in my area of employment. I also understand that it is my duty to report any direct or indirect incidents to carry out investigation.

Date: \_\_\_\_\_\_Supervisor: \_\_\_\_\_\_Trainer: \_\_\_\_\_

**Employee Name** 

Signature

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