

**FOR L&I USE ONLY**

Accr. #: \_\_\_\_\_

Date: \_\_\_\_\_

**ASBESTOS TRAINEE SIGN-IN SHEET**  
**(Must be submitted within 5 days of completion of training.)**  
**Can be mailed, faxed to (717) 705-0196, or emailed to CALBOIS@pa.gov.)**

<b>Training Provider Information</b>	<p><b>Training Provider must complete this section. Please print neatly.</b></p> <p>Training Provider's name _____ Accreditation # _____</p> <p>Street Address _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Telephone _____ Email _____</p> <p>Course Location: _____</p> <p>Instructor Name(s) <b>(Printed)</b>: _____ Instructor Name(s) <b>(Signed)</b>: _____</p> <p>_____</p> <p>_____</p> <p>Type of Course:</p> <p> <input type="checkbox"/> W                      <input type="checkbox"/> W REF                      <input type="checkbox"/> C/S                      <input type="checkbox"/> C/S REF                      <input type="checkbox"/> I  <input type="checkbox"/> I REF                      <input type="checkbox"/> MP                      <input type="checkbox"/> MP REF                      <input type="checkbox"/> PD                      <input type="checkbox"/> PD REF </p>																																
<b>Trainee Sign-In</b>	<p>Each trainee must neatly <b>print</b> and <b>sign</b> their proper name, in <b>AM</b> and <b>PM</b> columns (as applicable), and then insert the date of training.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 45%; text-align: center; border-bottom: 1px solid black;">AM SESSION</th> <th style="width: 45%; text-align: center; border-bottom: 1px solid black;">PM SESSION</th> <th style="width: 5%; text-align: center; border-bottom: 1px solid black;">DATE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1)</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="text-align: center;">____/____/20__</td> </tr> <tr> <td style="text-align: center;">2)</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="text-align: center;">____/____/20__</td> </tr> <tr> <td style="text-align: center;">3)</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="text-align: center;">____/____/20__</td> </tr> <tr> <td style="text-align: center;">4)</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="text-align: center;">____/____/20__</td> </tr> <tr> <td style="text-align: center;">5)</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="text-align: center;">____/____/20__</td> </tr> <tr> <td style="text-align: center;">6)</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="text-align: center;">____/____/20__</td> </tr> <tr> <td style="text-align: center;">7)</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="border-bottom: 1px solid black;">_____</td> <td style="text-align: center;">____/____/20__</td> </tr> </tbody> </table>		AM SESSION	PM SESSION	DATE	1)	_____	_____	____/____/20__	2)	_____	_____	____/____/20__	3)	_____	_____	____/____/20__	4)	_____	_____	____/____/20__	5)	_____	_____	____/____/20__	6)	_____	_____	____/____/20__	7)	_____	_____	____/____/20__
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**Trainee  
Sign-In  
Continued**

Each trainee must neatly **print** and **sign** their proper name, in **AM** and **PM** columns (as applicable), and then insert the date of training.

**AM SESSION**

**PM SESSION**

**DATE**

8)	_____	_____	___/___/20__
	_____	_____	
9)	_____	_____	___/___/20__
	_____	_____	
10)	_____	_____	___/___/20__
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