**INSTRUCTIONS:**

|  |  |
| --- | --- |
| **1.** | This training must be completed prior to being authorised to use equipment. Use of equipment also requires a demonstration of competency |
| **2.** | The person conducting the training must complete PART A when it has been completed and be competent to conduct training on this task or equipment. |
| **3.** | The trainee must sign the declaration in PART B. |
| **4.** | The Person who carries out the training will determine if the trainee is competent or not competent prior to authorising use of the equipment or performing the task. |
| **5.** | This document must be placed on the trainees file and a date of completion recorded on the Training Matrix. |

|  |  |  |  |
| --- | --- | --- | --- |
| **TRAINEE NAME:** |  | **DATE:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **POSITION:** | Staff | Student | Honorary / Visitor |

|  |  |
| --- | --- |
| **PERSON CONDUCTING TRAINING:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **TASK OR EQUIPMENT:** |  | **SOP or RA No:** |  |

|  |  |
| --- | --- |
| **RESEARCH GROUP:** |  |

# PART A – TRAINER SIGN OFF (to be completed by the person conducting the induction)

# *Pre Induction Checks:*

|  |  |
| --- | --- |
|  | The trainee has completed the Site Specific Induction. |
|  | The trainee is aware that supervised use of the equipment will be required until competency is reached. |

# *The following has been demonstrated / explained to the trainee.*

|  |  |
| --- | --- |
|  | The trainee has read the relevant safety documentation for this equipment. |
|  | The PPE requirements, hazards and warnings relating to the equipment or task have been explained to the trainee. |
|  | The safe work procedures for operation have been explained and demonstrated to the trainee. |
|  | Maintenance and cleaning requirements have been explained and demonstrated to the trainee. |
|  | Emergency and first aid information has been explained to the trainee. |

# *Demonstration of Competency – repeat as necessary until trainer is assured of competency.*

|  |  |
| --- | --- |
|  | The trainee correctly demonstrated specific requirements, if applicable, that must occur before operation, e.g. manual handling. |
|  | Selected and worn all the required PPE as per the SOP or Risk Assessment. |
|  | Demonstrated safe work practices as described in the SOP or Risk Assessment.  OGTR requirement to demonstrate competence three times  Date of training \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |
| --- | --- | --- | --- |
| **TRAINER SIGNATURE:** |  | **DATE:** |  |

**PART B - TRAINEE DECLARATION**

|  |  |  |  |
| --- | --- | --- | --- |
| *I have received and participated in the training for this equipment or task including reading relevant safety documentation and completing competency demonstrations. I understand my responsibilities and will use the equipment safely and in accordance with the Safe Operating Procedure. I will only operate equipment or perform tasks I have been trained to do.* | | | |
| **SIGNATURE:** |  | **DATE:** |  |