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## Shop Orientation & Fundamental Safety Training Form

I have reviewed, had an opportunity to ask questions about, been provided a copy of and understand the UC Santa Cruz Shop Safety Policies and Procedures document. I pledge to only conduct work according to the Shop Safety Policies and Procedures document. I understand that failure to follow the policies and procedures outlined within the document may result in expulsion and possibly permanent revocation of privileges to work in the shop facility. I understand that, in conjunction with the shop orientation and fundamental safety training process, I must be provided equipment and tool specific training to use designated pieces of equipment in the shop.

Signature: \_\_\_\_\_  
(Authorized Shop User)

Print Name: \_\_\_\_\_

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