New Biobank Trainee Checklist

\_\_\_ IRB Training

\_\_\_ HIPAA Training

\_\_\_ Badge Access

\_\_\_ Scrub Machine

\_\_\_ Blood Borne Pathogen Training

\_\_\_ Initial Lab Safety Training

\_\_\_ Hazardous Waste Training

\_\_\_ Fire Extinguisher Training

\_\_\_ Shadow someone twice

\_\_\_ Perform Supervised Collection three times

Trainee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trainee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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