## Logo or ty Formation plan

Employes number : 999999 Employes name : Mr. Test Test Post Title : Project Manager

Supervisor's name: Mr. Youcef Guerni

Building: 752 Douglas ST, Victoria BC V8W3M6

Formation	Status	frequency	Done on	Expected on	Expired	To come	To do	Never done
Individual protection equipment	Obligatory	2 years	10/31/14	10/31/16	366 days		To do	
Introduction to Safety for Managers	Obligatory	At hiring					To do	Never done
Office security	Obligatory	2 years	11/15/15	11/15/17		To come	To do	
Electrical hazards	Obligatory	2 years	7/27/16	7/27/18				
Sliding, tripping, falling	Obligatory	3 years	3/31/17	3/31/20				
Introduction to Occupational Health and Safety	Obligatory	1 year						Never done
Locking and labeling 1	Obligatory	2 years						Never done
Violence in the Workplace- Awareness	Obligatory	1 year						Never done
Annual Safety Review	Obligatory	1 year						Never done
SIMDUT Formation	Obligatory	2 years						Never done
Ladders - safety procedure	Recommended	2 years						Never done
Fall Protection Systems and Fall Arrest Systems	Obligatory	2 years						Never done
Locking and labeling 2	Obligatory	2 years						Never done
Handling of materials and prevention of back injuries	Obligatory	2 years						Never done
Due Diligence	Recommended	2 years						Never done

 $\label{lem:lemplace} $$ \c Template Employees \end{template} Template Formation Plan \end{template} In $$ (line 97) $$$ 

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