

SPARTAN SHOPS

ACKNOWLEDGEMENT FORM

This is to acknowledge that you understand and have completed the mandatory **Hazard Communication Standard (Right to Know)** training, required by Occupational Safety and Hazard Administration (OSHA).

Based on the information received, I am expected to adhere to the Hazard Communication Standard guidelines to help prevent chemical hazard incidents and the adverse health effects that may result, at my place of employment (Spartan Shops, Inc.), for the duration of my employment.

Employee Signature	Date	
Print Name		
Last 4 digits of Social Security Number:		