

Respirator Training Record

Employee Name

ID #

- I certify that I have watched the training video.
- I have reached out to the Respiratory Program Administrator with any questions.
- I certify that I have been trained in the use of the following respirator(s): N95
- I understand my role as the employee when wearing a respirator.
- I know what to do when I need additional N95 masks.

This training included the inspection procedures, fitting, maintenance and limitations of the above respirator(s). I understand how the respirator operates and provides protection. I further certify that I have heard the explanation of the respirator(s) as described above and I understand the instructions relevant to use, cleaning, disinfecting and the limitations of the respirator(s).

Employee Signature

Instructor Signature

Date