2020 Trench Safety Stand Down

Company: (as it should appear on certificate)

Location: Date

Subject Matter: Trench and Excavation Safety

Trainer: Total # Trained _____

I acknowledge that I have attended this Trench Safety Stand Down session. Through the discussion and presentation of the subjects covered and the interaction of this session, I understand how the issues and materials covered apply to me and to my job. I agree to apply the information presented in this session to my job, to the best of my ability.

Attendee (Print Name)	Signature	ID # or Last 4 SS# (optional)

Attendee (Print Name)	Signature	ID #/Last 4 SS# **(optional)**