TENNESSEE DEPARTMENT OF EDUCATION

WBL Safety Training Log

The following safety training log should reflect the training requirements appropriate for the student's job description and align with the required trainings of the business. According to Tennessee Child Labor Law and WBL Policies, this form must be kept up-to-date in the personnel file at the workplace and at the school. Copies of the Safety Training Log and the WBL Agreement must be kept on file at the school for five years after placement.

Student Name:	**Work Site:**
Address:	**Address:**
City/Zip:	**City/Zip:**
Phone:	**Phone:**
DOB:	**Supervisor:**

Student's Responsibilities/Job Description:_____

_____

Safety Training Topics*	Trainer's Name	Location	Date Provided
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

**If additional space is needed, attach an extra sheet of paper.*

SIGNATURES

Student:	**Date:**
Parent or Guardian:	**Date:**
Endorsed Teacher: *(When not the WBL Coordinator)*	**Date:**
WBL Coordinator:	**Date:**
Principal: **School:**	**Date:**
CTE Director: *(or designated WBL Coordinator)*	**Date:**
Work Site Supervisor:	**Date:**

Note: It is the policy of the school district that no person on the basis of race, color, religion, national origin or ancestry, age, sex, marital status, disability, or disadvantage should be discriminated against, excluded from participation in, denied the benefits of or otherwise be subjected to discrimination in any program or activity. This form is subject to monitoring by TDOE and/or TDOL&WD.