

Application for Certificate in Knowledge and Handling of Hazardous Substances Course

Applicant Details	Full Name	
	Residential Address	
	Mobile Number	
	DOB	
	Position at Work	
	PO NUMBER For invoicing if required	
	Photo ID Type:	Type: Drivers Licence/Passport Other: _____ Number: _____

Notes:

1. The Worksafe has requested we supply birth dates for each applicant.
2. The Handler Compliance Certificate will be issued which is valid for a period of five years.
3. The Handler Compliance Certificate will be sent to the business in the first instance.

Substances Handled (to be reflected on certificate) Please send Workplace inventory

Substance Eg: LPG, Petrol	Classification Eg: 6.1A or 6.1B; 3.1B, 5.1.2A	Quantity on site Kg or Litres or m3	Lifecycle: Manufacturing/ Use in Manufacturing/ Use/ Storage/ Disposal/ Transport (only Bulk)

Application Checklist:

- Candidate Application form Pages 1 completed and signed
- On-site Competency and Working Knowledge Pages 2-4 completed and signed
- Copy of Previous Approved Handler certificate if upgrading
- Copy of Photo ID :eg: Drivers License or Passport etc..
- Copy of current Workplace Inventory

Special note: Please ensure all sections of this application form are completed. Managers, team Leaders or Supervisors must sign the declaration on the onsite competency assessment to confirm that employees have the knowledge and the skills to undertake the ten (10) functions stated.

Applicant Declaration

I, _____ am confident that I have received the necessary training and work experience for the substances I have applied to be certified for. I declare the information (as per application checklist) I have supplied for this assessment is true, complete, and correct and I have been assessed for the competencies listed in this form by the supervisor named on my on-site assessment. I understand that it is an offence to make a false declaration, including supplying false or misleading information.

Applicant Signature: _____ Date: _____

PCBU/Supervisor Declaration: I _____ (PCBU/Manager) am aware payment for course is required prior attendance of course. I agree(on behalf of the company) that debt collection charges will be charged for collection plus outstanding account after 90 days of invoice.

Work Supervisor/PCBU Signature: _____ Date : _____

On Site Competency+ Working Knowledge Handler Training Assessment

This full section needs to be filled out by Work Supervisor/Management/PCBU

Worker Details	Full Name	
	Residential Address	
	Mobile Number	
	DOB	
	Position at Work	
	Photo ID Type:	Type: Drivers Licence/Passport/Other: Number:
Work Supervisor/PCBU Details	Company Name	
	Business Site Address	
	Business Postal Address	
	Contact Telephone Number	
	Contact Email Address	
	Full Name of Business Trainer	
	Position	
	Industry/Business Type	

Hazardous Substances Handler Training Record:

How were these assessments made *(please circle all types of training method provided to worker)*

Observation/ Verbal/ Written/ Other: _____ (please circle)

Substances Handled: Attach hazardous substance inventory if required and highlight classes they are handling

Name of Substance	Classification Eg: 6.1A or 6.1B	Quantity on site	Lifecycle- when handling substances: Manufacturing/ Use in Manufacturing/ Use/ Storage/ Disposal/ Transport (only Bulk)

Candidate Competency and Working Knowledge Questions		Verification/ Comments
1.	<p>Procedures, Risk and Records</p> <p>Has the worker received information, training and instruction of their responsibilities of being a Certified Handler and aware of your business procedures pertaining to HSWA and HSNO processes/requirements.</p> <p>Does the worker know how to do the jobs they are given that involve hazardous substances?</p> <p>Has the worker demonstrated working knowledge and competency in following procedures for handling hazardous substances?</p> <p>Does the worker know the harm each hazardous substance they use at work can cause harm?</p> <p>Has the worker had practical experience under direct supervision reflecting the risks associated with hazardous substances?</p> <p>Does the worker know to ask their supervisor questions if they don't know how to safety use or store a hazardous substance?</p> <p>Training records: worker training and instruction. Explain to worker what format and where it is stored: Format: (circle formats): Saved as I-cloud, Electronic copy, physical file, other: _____</p>	<p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p>
2.	<p>Change to Regulations & Courses</p> <p>Is the worker aware of the new changes of the HSNO + HSWA Regulations in relation to the hazardous substances they are handling?</p> <p>Has the worker attended any Training Courses covering higher level of training: Regulations, Obligations and Liabilities? If yes: Please list certificates or extra training, training provider and expiry dates: <i>Please keep copies of all certificates</i></p>	<p>Yes /No</p> <p>Yes /No</p>
3.	<p>Personal Protective Equipment</p> <p>Has the worker received information, training and instruction of Personal Protective Equipment (PPE)?</p> <p>Has the worker been provided the right safety equipment and PPE?</p> <p>Has it been correctly fitted for purpose?</p> <p>Does the worker understand if using respirators, they need to fit properly and doing a seal test prior to use? <i>ie: for respirators having a good seal: men need to be clean shaven..</i></p> <p>Does the worker understand the control measures at the workplace to reduce exposure to the substances and keep safe and healthy?</p> <p>Has the worker demonstrated their ability to select correct Personal Protective Equipment (PPE) for the hazardous substances they are handling. <i>E.g. Eye Protection, respirator and gloves.</i></p>	<p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p> <p>Yes /No/NA</p> <p>Yes /No</p> <p>Yes /No</p>
4.	<p>SDS, Emergency Response and First Aid</p> <p>Has the worker received information, training and instruction of SDS to the hazardous substances they are handling and can demonstrate working knowledge of what information they provide, where to locate them and refer to them as extra guidance to using hazardous substances?</p> <p>Where can the worker access them:</p> <ul style="list-style-type: none"> • Copies of SDS are located _____ • Condensed Versions are located _____ <p>Has the worker received information, training and instruction of the <i>workplace emergency procedures</i> and can demonstrate working knowledge of what to do in emergencies involving the substances they are handling.</p>	<p>Yes /No</p> <p>Yes /No</p>

	<p>E.g. Spill, Fire and Flood.</p> <p>Has the worker been trained to use first aid equipment to deal with incidents involving hazardous substances, such as splashes?</p> <p>Does the worker know who on site is involved with Emergency Response Plan, who to contact if there was a incident involving the substances they are using?</p> <p>Does the worker understand what level of ERP your site is and what this means?</p> <p>When it was last practiced? _____</p>	<p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p>
<p>5.</p>	<p>Equipment Handling</p> <p>The worker has received information, training and instruction of the correct operation equipment required when using hazardous substances?</p> <p>Has the worker demonstrated working knowledge on the correct operation of equipment used with the relevant hazardous substances?</p> <p>What equipment is handled (e.g: <i>Spray Gun, Printing Press and Dispensers</i>)</p> <p>_____</p> <p>_____</p> <p>Has the worker received information, training and instruction or has demonstrated competency in the use of:</p> <p>PRODUCT HANDLING: Forklift Pallet Trolley Other</p> <p>SAFETY EQUIPMENT: Fire Extinguisher: What Type/s: _____ Fire Hose Reel Personal Protective Equipment Spill control Equipment Other</p>	<p>Yes /No</p> <p>Yes /No</p> <p>Yes /No/NA Yes /No/NA Yes /No/NA</p> <p>Yes /No Yes /No Yes /No Yes /No Yes /No</p>
<p>6.</p>	<p>Control of Ignition- Flammable Substances</p> <p>The worker has received information, training and instruction of hazardous atmosphere zones on the site and what the dangers are of sources of ignition within that area?</p> <p>The worker has demonstrated working knowledge and competency in checking there are not potential sources of ignition within the hazardous atmosphere zone: storage areas.</p>	<p>Yes /No</p> <p>Yes /No</p>
<p>7.</p>	<p>Spills and Disposal</p> <p>The worker has received information, training and instruction of Spills and Disposal of the hazardous substances they are handling on site?</p> <p>Has the worker demonstrated working knowledge in how to contain spills and manage damaged product?</p> <p>Has the worker demonstrated working knowledge and ability to correct disposal of substances and packaging?</p>	<p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p>
<p>8.</p>	<p>Segregation of Incompatible Substances</p> <p>The worker has received information, training and instruction of the importance to segregation Incompatible substances held on site?</p> <p>Has the worker demonstrated working knowledge of which substances are incompatible and need to be stored separately?</p> <p>Has the worker demonstrated competency in selecting storage locations with respect to the storage plan and segregation requirements?</p>	<p>Yes /No</p> <p>Yes /No</p> <p>Yes /No</p>

9.	Formulation of Mixtures and Decanting	
	The worker has received information, training and instruction of mixing hazardous substances on site	Yes /No/NA
	Has the worker demonstrated working knowledge of procedures when formulating mixtures?	Yes /No/NA
	Has the worker demonstrated competency in following procedures for handling hazardous substances?	Yes /No/NA
	The worker has received information, training and instruction of decanting and labelling hazardous substances on site	Yes /No/NA
	Has the worker demonstrated working knowledge of procedures when decanting?	Yes /No/NA
Has the worker demonstrated competency in following procedures for decanting and labelling hazardous substances?	Yes /No/NA	

Summary of workers training & experience(qualifications) relative to these Hazardous Substances they are handling:

Worker Declaration

I declare that the information supplied for this assessment is true, complete, and correct, and I have been assessed for the competencies listed in this form by the supervisor names on my on-site training assessment and I am able to carry out all competencies detailed in this assessment form.

I understand that it is an offence to make a false declaration, including supplying false or misleading information.

Worker Signature: _____ Date : _____

Work Supervisor/PCBU Declaration

I declare that the information I have supplied for this assessment is true, complete, and correct, and I have assessed the applicant for the competencies listed in this form and consider the applicant is able to carry out all competencies detailed in this assessment form.

I understand that it is an offence to make a false declaration, including supplying false or misleading information.

Work Supervisor/PCBU Signature: _____ Date : _____