|  |  |  |  |
| --- | --- | --- | --- |
| **Instructor:** |  | **Location:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** (first and last)  **Please print** | **Identification**  **Employee or Student ID** | **Email**  **UC Email, if available** | **Signature** | **Date** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Submit this form to Environmental Health & Safety (EH&S), Mail Code 0920, or email [ehs-training@ucsd.edu](mailto:ehs-training@ucsd.edu).