

	COVID-19 Guidance Self Certification	2020
---	---	-------------

Email: _____

Supervisor: _____

Date: _____

Last Name: _____

First Name: _____

Company: _____

By checking the box and completing the certificate, you certify that you have completed this training and understand the safety guidance provided.

Please complete the fillable certificate

Provide a copy to your employer.

Keep a copy for your record

Send a copy to SUNY Poly EHS using the following steps:

1. Click File -> Save As
2. Name your document and save it to your computer
3. Attach the file to an email and email it to:

SUNYPOLYEHS@SUNYPOLY.edu