Contractor Name:	Date:
Contractor Project Manager:	
Supervisor/Manager confirming training has been completed:	

Print Name Legibly (use middle initial, and Sr. or Jr. as necessary)	Signature
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Print and use additional rosters as needed. Scan and send to Jill E Taptich, Safety Manager @ jetaptich@columbus.gov
before your staff is scheduled to be on site. Random checks may be performed by DPU safety staff to ensure compliance.