



Training Certificate Introduction to Health and Safety

Trainees Name: *Mariah Abed*

Department: *Passenger Services*

Initial / Recurrent

Training Modules	
1.	Policies
2	Health and Safety Manual
3	Employee's responsibility for Health & Safety
4	Incident/Accident and Dangerous occurrence Reporting
5	First Aid
6	Smoking Policy
7	Hand Held Electronic Devices
8	Personal Protective Equipment
9	Drug and Alcohol

Trainee's Declaration:

"I have received full instruction/ training of the above operational procedures and I fully understand the training that I have been given"

Trainee's Signature: *[Signature]* Date: *04.11.2022*

Trainers / Instructors Declaration:

"I certify that the above named employee has received full instruction, training and has access to a copy of the procedures in this field of operation."

Trainer/Instructors Name: *GORAN KVARNIK*

Trainer/Instructor's Signature: *[Signature]*

Date: *04.11.27.*