

## Training Report

<b>* Activity Names - All Entries Must Be Typed</b>		
1. *MACOM/Wing Name (Column C):		IDENT (H):
2. *Group/Brigade Name (Column E):		IDENT (J):
3. *Squadron/Battalion Name (Column G):		IDENT (L):
4. *Unit Name (Column I):		IDENT (N):
5. Name and Grade of AEC:		7. Telephone: _____
6. Certification and Signature of AEC:		8. Date: _____
<b>Training Summary Data</b>		
<b>Training</b>	<b>Total Number of Personnel Trained</b>	<b>Number of Universal Waste Handlers (UWH); Hazardous Waste Supervisors (HWS); and Hazardous Waste Handlers (HWH) Trained</b>
EMAC		
<b>Subtotal:</b>		
<b>TOTALS:</b>		
<b>Total Number of Personnel Assigned (Military, Civilians &amp; Contractors):</b> _____		
<b>**Percent Trained:</b> _____		
<b>** If the Percent Trained is less than 90%; A Memo must accompany the Report Explaining</b>		
<b>HazCom Training</b>	<b>Estimated Number of Personnel Requiring HazCom:</b> _____	
	<b>Number of Personnel HazCom Trained:</b> _____	
<b>I certify that the all information on this form is complete and accurate. I understand that I am subject to potential civil or criminal enforcement for false certification under RCRA, UCMJ, and Virginia law.</b>		
Phone Number	Signature of Commander or Director	
Date	Typed or Printed Name and Grade	
Email of Commander or Director:	Typed or Printed Title (Commander or Director)	