



08/17/2021 12:29 PM

Requirement Name	Requirement Details	Status	External Comments
US - Bloodborne Pathogens	Please provide evidence of Bloodborne Pathogens training completed within the last 12 months. Examples of evidence could include rosters, safety meeting minutes, toolbox talks, etc. Ensure that the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Training date (within the last 12 months) 3. Trained employee(s) name(s) and/or signature(s) 4. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 5. Course Name (Bloodborne Pathogens)	Upload Document	
US - Electrical Safety Awareness	Please provide evidence of Electrical Safety Awareness completed within the last 3 years. Examples of evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Valid certification and/or training date (within the last 3 years) 3. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 4. Trained employee(s) name(s) and/or signature(s) 5. Course Name (Electrical Safety Awareness)	Upload Document	
US - Fall Protection	Please provide evidence of Fall Protection training completed within the last 3 years. Examples of evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that	RAVS Verified	

The information contained in the RAVS Training Document Requirements, Requirement Details, Status and External Comments, are all provided as guidance to assist Contractors/Suppliers in complying with specified regulatory guidelines and/or Hiring Client requirements, but are not intended, and should not be used, to ensure conformance with such regulations or requirements.



Training Document Requirements Maintenance Metrology (400-319392)

08/17/2021 12:29 PM

	the following are included:		08/1//2021 12:29 PM
	1. Company name and/or identifier (not required if submitting an individual certificate) 2. Training date (within the last 3 years) 3. Trained employee(s) name(s) and/or signature(s) 4. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 5. Course Name (Fall Protection) - Awareness level training is not acceptable		
US - Fire Protection	Please provide evidence of Fire Protection training completed within the last 12 months. Examples of evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Training date (within the last 12 months) 3. Trained employee(s) name(s) and/or signature(s) 4. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 5. Course Name (Fire Protection) - Awareness level training is not acceptable	Upload Document	
US - First Aid	Please provide evidence of First Aid training completed within the last 2 years. Examples of evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Valid certification and/or training date (within the last 2 years) 3. Employee(s) name(s) and/or signature(s)	RAVS Verified	

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Training Document Requirements Maintenance Metrology (400-319392)

08/17/2021 12:29 PM

US - Ladder Safety	4. Instructor name and/or signature OR an identifier of the authorizing agency 5. Course Name (First Aid) - Awareness level training is not acceptable Please provide evidence of Ladder Safety training completed within the last 3 years. Examples of evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that	RAVS Verified	08/17/2021 12:29 PM
	the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Training date (within the last 3 years) 3. Trained employee(s) name(s) and/or signature(s) 4. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 5. Course Name (Ladder Safety) - Awareness level training is not acceptable		
US - Lockout/Tagout	Please provide evidence of Lockout/Tagout training completed within the last 3 years. Examples of evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Training date (within the last 3 years) 3. Trained employee(s) name(s) and/or signature(s) 4. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 5. Course Name (Lockout/Tagout) - Awareness level training is not acceptable	RAVS Verified	
US - Personal Protective Equipment (PPE)	Please provide evidence of Personal Protective Equipment (PPE) training completed within the last 3	RAVS Verified	

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08/17/2021 12:29 PM

	years. Examples of training evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Training date (within the last 3 years) 3. Trained employee(s) name(s) and/or signature(s) 4. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 5. Course Name (Personal Protective Equipment (PPE)) - Awareness level training is not acceptable		
US - Process Safety Management / Contractor Responsibilities (PSM)	Please provide evidence of PSM training completed within the last 3 years. Examples of evidence could include rosters, safety meeting minutes, certificates, toolbox talks, etc. Ensure that the following are included: 1. Company name and/or identifier (not required if submitting an individual certificate) 2. Training date (within the last 3 years) 3. Trained employee(s) name(s) and/or signature(s) 4. Instructor name and/or signature (not required if submitting computer based training (CBT) roster) 5. Course Name (Process Safety Management / Contractor Responsibilities (PSM))	Upload Document	