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**SAFETY CONVERSATION**

**GROUP TRAINING RECORD**

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| **Unit Name:** |  | **Trainers Name:** |  | **Safety Conversation:** |  |
| **Unit Number:** |  | **Trainers Signature:** |  | **Date of Conversation:** |  |
| **By signing below, I confirm that I have received the safety conversation on the topic listed above and that I will follow this information as applicable to my job role.** |
| **Trainee Name** | **Trainee Signature** | **Trainee Name** | **Trainee Signature** |
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