



All Employees of No Worries Corporation

PPE Policy Agreement

No Worries has provided training on Standard Precautions through a video and quiz at orientation and will provide yearly refreshers during In-services. Working in this field, I am aware of the reasons why I am responsible for wearing Personal Protective Equipment (PPE) that No Worries has provided me.

I understand that, due to occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring HIV, HBV, or other infectious diseases. I take responsibility for wearing my PPE whenever I am at risk or feel that there is a chance of exposure.

I will call No Worries to inform them of any circumstances that I feel may put me at risk and request any materials or replacement of PPE to protect myself and my co-workers. I will report any unprotected occupational exposures to infectious materials to my supervisor immediately.

Signature: _____ Date: _____

Print Name: _____