APPENDIX H: Employee Fit Test Certification Card

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| **Employee Fit Test Certification Card**  *Please keep with your records*  Place LHD Logo Here  Fit Test Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Respirator Type and Size:  Expiration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fit Tester Initial: \_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Employee Fit Test Certification Card**  *Please keep with your records* Place LHD Logo Here  Fit Test Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Respirator Type and Size:  Expiration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fit Tester Initial: \_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Employee Fit Test Certification Card**  *Please keep with your records* Place LHD Logo Here  Fit Test Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Respirator Type and Size:  Expiration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fit Tester Initial: \_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Employee Fit Test Certification Card**  *Please keep with your records* Place LHD Logo Here  Fit Test Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Respirator Type and Size:  Expiration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fit Tester Initial: \_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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