

Training Completion Record CPCCO COMPETENT PERSON - LEAD		Records Use Only
STUDENT HID/Person ID: _____ Last Name: _____ First Name: _____ MI: _____		
TRAINING Course No.: _____ Date Completed: _____ CACN: _____ Company: _____ 600061 Course Title: CPCCo Competent Person - Lead (PB)		
TRAINING STATUS CODE (If blank, default is Complete): <input type="checkbox"/> Complete <input type="checkbox"/> Fail <input type="checkbox"/> Incomplete		
Criteria: Hazard Recognition and Control Experience Employee has demonstrated or responded favorably to questions regarding being capable of identifying existing and predictable hazards in the surroundings or working conditions, which are unsanitary, hazardous, or dangerous to employees, and who has authorization to take prompt corrective action to eliminate them. Also includes application of: <ul style="list-style-type: none"> • 1926.62(b), Capable of identifying existing and predictable lead hazards • 1926.62(e)(2)(iii), Inspections of the job site 		
Criteria: Training (<i>The following courses or equivalent are required</i>) <ul style="list-style-type: none"> • Course 620150, CPCCo Lead Worker 		
Evaluation Criteria: Employee (<i>i.e., Student</i>) has been evaluated and has demonstrated satisfactory completion of the following duties, or demonstrating an understanding of such. <ol style="list-style-type: none"> 1. Conduct frequent and regular inspections of job sites, materials, and equipment in accordance with the Lead Program compliance program 2. Demonstrated knowledge on the requirements contained in CPCC-PRO-SH-40498, <i>Toxic Metals Exposure Control</i> 		
Meets		Evaluation Points
Yes	No	
<input type="radio"/>	<input type="radio"/>	Required Hazard Recognition and Control Criteria have been met.
<input type="radio"/>	<input type="radio"/>	Training is determined acceptable.
<input type="radio"/>	<input type="radio"/>	Experience is determined acceptable.
<input type="radio"/>	<input type="radio"/>	Required Evaluation Criteria has been met.

Training Completion Record
CPCCO COMPETENT PERSON - LEAD

STUDENT	HID/Person ID:	Last Name:	First Name:	MI:
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Signatures/Dates

Candidate:

My signature indicates that I consider myself qualified to fulfill the duties and responsibilities of a Competent Person for lead.

<hr/> <i>Print First and Last Name</i>	<hr/> <i>Signature / Date</i>
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Subcontractor Evaluator *(only required if the candidate is a subcontractor):*

My signature indicates that I have evaluated the candidate and have verified they have the training, knowledge, skills, and ability to perform the assigned duties and meet all the requirements listed to be designated as a Competent Person for lead.

<hr/> <i>Print First and Last Name</i>	<hr/> <i>Signature / Date</i>
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CPCCo Evaluator *(required for both subcontractor and CPCCo candidates):*

My signature indicates that I have evaluated the candidate and have verified they have the training, knowledge, skills, and ability to perform the assigned duties and meet all the requirements listed to be designated as a Competent Person for lead. CPCCo evaluators must complete this Competent Person - Lead TCR (600061) prior to performing the function of the evaluator.

<hr/> <i>Print First and Last Name</i>	<hr/> <i>Signature / Date</i>
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Candidate's Manager:

My signature indicates that I qualify the candidate to be designated as a Competent Person in lead for CPCCo work activities who may be assigned work requiring the qualification and give them authorization to take prompt corrective measures to eliminate identified and predictable hazards.

<hr/> <i>Print First and Last Name</i>	<hr/> <i>Signature / Date</i>
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CPCCo OS&IH Manager:

My signature indicates that I concur with the candidate being designated as a Competent Person in lead for CPCCo work activities.

<hr/> <i>Print First and Last Name</i>	<hr/> <i>Signature / Date</i>
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Authenticator *(CPCCo training will authenticate when received):*

<hr/> <i>Print First and Last Name</i>	<hr/> <i>Signature / Date</i>
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