



THIS CERTIFIES THAT

has satisfied the training requirements as set out in Section 5 of the Saskatchewan Occupational Health and Safety Regulations (WHMIS) and is in compliance with WHMIS 2015 GHS.

Trainer: _____

Date issued: _____

Expiry date: _____

**THIS TRAINING IS ONLY VALID WHILE PERFORMING WORK ON BEHALF OF THE WDM
AND IS NON-TRANSFERABLE**