

ANNUAL REFRESHER TRAINING RECORD/CERTIFICATE

Miners Full Name (print): _____

Mine or Contractor Name: _____ **ID#** _____

Subject 30 CFR Part 46.8	Subject Length	Date	Competent Person	Location (Name & Address of Institution)	Miner ' s Initials
<i>The miner received no less than 8 hours of annual refresher training in the following:</i>					
Instruction on changes at the mine that could adversely affect the miner ' s health or safety					
Health and safety subjects relevant to mining operations at the mine					
<i>(For recommended subjects see 46.8 (c))</i>					
Top 10 Citations/MSHA Update	60	03/01/21	OAIMA	GoToWebinar	
MSHA Regulations, Enforcement and Silica Update	60	03/01/21	OAIMA	" "	
Tire Safety	60	03/02/21	OAIMA	" "	
Dredge & Conveyor Safety	60	03/02/21	OAIMA	" "	
Confined Space	60	03/03/21	OAIMA	" "	
Hearing Conservation	60	03/04/21	OAIMA	" "	
Underground Ground Control Safety	60	03/04/21	OAIMA		
Crisis Management	60	03/05/21	OAIMA	" "	
Conveyor Safety	45	03/05/21	OAIMA	" "	
				" "	

False certification is punishable under section 110 (a) and (f) of the Federal Mine Safety and Health Act
 I certify that the above training has been completed

(Signature of person responsible for health and safety training)_____

Date:_____