

Volunteer / Visitor General Workplace HSW Training Declaration

'I declare that I have read, completed and understood the UQ health, safety and wellness induction module.'

Name:

Business Unit:

Signature

Date

Action

Please print the declaration, sign, and send to your supervisor and local Work Health and Safety Coordinator (WHSC).

Additional Information

For further information, contact your local [Work Health and Safety Manager/Coordinator](#).
