



St. Pauly Textile, Inc. Annual Safety & Sexual Harassment Training

I, _____ have completed my annual safety & sexual harassment training provided by St. Pauly Textile, Inc. By signing this, I certify that I understand the training, will abide by the guidelines set forth, will act in an appropriate and respectful manner, and will report any sexual harassment that I experience or witness to the appropriate manager.

Employee Name

Employee Signature

Date

Trainer Name

Trainer Signature