

**XYZ EMPLOYER:
SUNSCREEN AND SUN SAFETY
EMPLOYEE ACKNOWLEDGEMENT FORM**

Date: ____ / ____ / ____

Name of Employee: _____

As an employee of the above business, I recognize that too much sunlight may increase my risk for skin cancer later in life.

Therefore, I acknowledge that:

1. I have been educated by my employer on the dangers of UV exposure.
2. I fully understand that a combination of factors are required to adequately protect me from UV radiation exposure, including but not limited to sunglasses, protective clothing, protective headwear, and sunscreen.
3. I fully understand that the responsibility of protecting myself from UV radiation exposure is my own.
4. My employer has made Rocky Mountain Sunscreen available for my use at any time.
5. I recognize that my employer has adequately instructed me in the proper use of this sunscreen product. Specifically, I understand that sunscreen should be applied to all exposed skin at least 30 minutes prior to sun exposure, including but not limited to the face, tops of ears, nose, bare shoulders, arms, and legs.
6. I have consulted with my physician, and do not know of any allergies or allergic reactions I may have to Rocky Mountain Sunscreen SPF ____.

Employee's Full Name (Please Print): _____

Employee's Full Signature: _____

NOTE: THIS IS A SAMPLE, AND IS MEANT TO BE SUGGESTIVE ONLY. AS WITH ANY LEGAL DOCUMENT, WE SUGGEST YOU CONSULT WITH YOUR LAWYER BEFORE IMPLEMENTING ANY TRAINING ACKNOWLEDGEMENT FORM.