

Team:





## **National Electrical Safety Briefing Attendance Sheet**

**Access to Traction or non-Traction Distribution Locations** 

Date: Location:		
Name	Signature	Distribution competence held (please indicate): (Level A, B, or C)

## **Notes:**

A copy of this form should be given to your CDS or Sentinel Administrator to log the Level C Re-brief.

This form shall be retained for 12 months.