



## Fire Safety On-Line Training record

Circle or enter the Correct Answer

1. **Your Emergency Number is:** \_\_\_\_\_
  
2. **Which one of the following do not make up the three sides of the Fire Triangle.**
  - a) Oxygen
  - b) Smoke
  - c) Heat
  - d) Fuel
  
3. **A Carbon Dioxide Extinguisher will work on a Class A Fuel.**
  - True or False?
  
4. **When the fire alarm sounds, all occupants must evacuate the building immediately. (Hospital Excluded)**
  - True or False?
  
5. **Class B encompass what type of fuel?**
  - a) Regular Flammables
  - b) Liquid Flammables
  - c) Electrical Flammables
  - d) Flammable Metals

Date:	<b><u>PLEASE PRINT CLEARLY</u></b>	Supervisor Name:
Employee Name:	Department	Supervisor Signature:
Employee Signature:		Supervisor Email:
Employee Email Address	Employee Phone Extension	Supervisor Phone Extension:
Employee/Student ID number:		

This test record must be completed by the individual participating in the training. This test record is the documented record of your participation in this training.

The intent of this record is to prove one's review of specific training materials. By signing these documents, you agree that you have reviewed the appropriate materials in detail and understand them. Please forward the original or a copy of this test record to the EOHSS office. Please retain a copy for your records. **If you are from the Faculty of Health Science, please send your forms to the FHS Safety Office in HSC 1J11 or fax to 905-528-8539**