

# Certificate of Completion

The completed course complies with current OSHA regulations  
under OSHA Code 29 CFR 1910.147.



*NOF*  
This certificate is hereby awarded to:

**Kayla Covington**

SCAN ME

SIGNATURE OF STUDENT **X**

*NOF*  
\*Scan QR Code to Verify  
Certificate Authenticity

ON-SITE EVALUATION **X**

*Signature of Test Administrator & Date*

AWARDED CERTIFICATE # **NOF-1756676381-7364-123891**

COURSE COMPLETION DATE **August 31, 2025**

*Renewal Due 2 Years from Completion Date*

COURSE NAME **Hazard Communication GHS Course**

*NOF*  
Hands-on Evaluation Form Must  
Accompany This Certificate

NationalOshaFoundation.com



## HAZARD COMMUNICATION GHS

Student: **Kayla Covington**

Course: **Hazard Communication GHS Course**

Completion Date: **August 31, 2025**

Certification ID# **NOF-1756676381-7364-123891**



*NOF*  
Renewal Due 2 Years from Completion Date Certificate of Completion Must Accompany Card

NATIONALOSHAFoundation.COM 

Official Wallet Card