Document Review Form
(for LSASD's Internally Controlled Documents)

Review Information

Document Name:	Training and Competency					Document Author:	Desiree Smith
Document Control Number:	LSASDPROC	-	1003	-	R2	○ New Document	● Existing Document

Evaluation of Document's Base Method

(*Not Applicable for all LSASD Documents*)

Previous Method Reference/Revision Number/Date:	
Current Method Reference/Revision Number/Date:	

If different, describe the changes made to the method which were included in the document:

If the method has been revised and it is chosen not to update the document to reflect those revisions, explain why:

Secondary Review

Reviewer 1: Kristin Trapp	Date of Review: 7/2/24

Review Comments (If Applicable):

Reviewer 2:	Date of Review:

Review Comments (If Applicable):

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Format Review
(To be completed by LSASD Document Control Coordinator)

Format Checked by DCC?	◉ Yes ○ No	Document Effective Date:	

Comments (If Applicable):

Document Approval

Document Control Coordinator			
Title	Name	Signature	Date
Document Control Coordinator	Desiree Smith	DESIREE SMITH Digitally signed by DESIREE SMITH Date: 2024.07.02 14:58:41 -04'00'	
Document Author			
Title	Name	Signature	Date
Chemist	Desiree Smith	DESIREE SMITH Digitally signed by DESIREE SMITH Date: 2024.07.02 14:59:36 -04'00'	
Issuing Authority			
Title	Name	Signature	Date
Acting Deputy Director	Stacie Masters	STACIE MASTERS Digitally signed by STACIE MASTERS Date: 2024.07.02 16:55:58 -04'00'	