

**Oak Ridge Office  
Training and Development Group  
ISMS Track 2 Self-Certification Form**

By my signature below, I certify that I have read and understand my ISMS responsibilities as described in the following ISMS training activities:

Activity 1	Integrated Safety Management System (ISMS)
Activity 2	Functions, Responsibilities, and Authorities Manual (FRAM)
Activity 3	Issues Management
Activity 4	Safety Planning
Activity 5	Technical Competency
Activity 6	Facility Representatives
Activity 7	Federal Employee Occupational Safety and Health (FEOSH)
Activity 8	< Reserved >
Activity 9	Work Authorization
Activity 10	Contractor Oversight
Activity 11	Safety Basis
Activity 12	Work Smart Standards
Activity 13	Price-Anderson Amendments Act (PAAA)
Activity 14	Introduction to DOE-ORO Quality Assurance
Activity 15	Safety System Oversight Program
Activity 16	Environmental Management System
Activity 17	Lessons Learned Program
Activity 18	Packaging and Transportation Safety

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Employee Name (Please print)

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Employee Signature

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Date