

CERTIFICATE

OF COMPLETION



This Certification Is Hereby Awarded To:

SCAN ME!

Liobardo Saldana

OPERATOR SIGNATURE x

The above individual has completed course requirements in compliance with OSHA regulations under OSHA Code 29 CFR 1910 1926 Permit-Required and Non-Permit Confined Space Standard



CONFINED SPACE

01/22/2025

ON-SITE EVALUATION
SIGNATURE OF TEST ADMINISTRATOR & DATE

NOF-1737565580-2409-98941

CERTIFICATION ID#



COURSE COMPLETION
DATE

01/22/2027

COURSE EXPIRATION
DATE

OFFICIAL WALLET CARD



CONFINED SPACE

Certification ID# : NOF-1737565580-2409-98941

Awarded : 01/22/2025

Expires : 01/22/2027

Operator Signature :

x



NationalOSHAfoundation.com

This Card Certifies That The Below Individual Has Successfully Completed The Objectives & Examination in Accordance with the Curriculum of the NOF Certification & Training Program.

Liobardo Saldana
Confined Space Certified

