

# Car Wash Enterprises, Inc.

## PCI-DSS SECURITY AWARENESS TRAINING

**Location:** \_\_\_\_\_

**Team Member:** \_\_\_\_\_

**Type of Training:** ☐ Upon Hire ☐ Annual

I confirm that I have completed the PCI-DSS Security Awareness Training. I viewed and understood the training material that was presented. I understand as a team member, it is my responsibility to abide by Car Wash Enterprises' PCI Compliance policy and procedures, in accordance with this training.

I further understand the importance of safeguarding cardholder information and that I have been instructed on how to inspect card reader devices for tampering, check serial numbers to ensure no swapping out of devices, and skimmers or other attachments on a daily basis.

In addition, it is my responsibility as a team member to immediately seek clarification from my supervisor if I do not understand the training materials presented or the Car Wash Enterprises' PCI Compliance policy and procedures. Also, it is my responsibility to immediately inform my supervisor if I observe a fellow employee not adhering to the Car Wash Enterprises' PCI Compliance policy and procedures.

My signature below certifies that I have received the following training.

_____	_____	_____
Date	Team Member Name (print)	Team Member Signature

_____	_____	_____
Date	Trainer Name (print)	Trainer Signature