

Training Attendance Record

Insert Training Topic

Training Content:							
Trainer/Facilitator:		Company:	Signature:				
Date:	Time:	Location:					

Please print and sign your name in the space provided

Name	Signature	Name	Signature
			-

Revisions

Document number		тоо –					
Version	Approval date	Approved by	Effective date	Policy owner	Policy contact		
Draft	30.01.2019	Training Attendance Record	DD.MM.YYYY	Manager Risk & Compliance	WHS Manager		
Next scheduled review		DD.MM.YYYY					