

WORKER TRAINING LOG

Name of operation:

Date:

Trainer:

Training Time:

Location:

Training material (Please attach any written materials to this log with a staple):

Employee Name (please print)	Employee Signature
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____

Reviewed by:

Title:

Date: