GROUP TRAINING RECORD

Trainer Name

Trainer Phone | Trainer Email

Trainees Place of Employment (Facility Name)

Premises ID Number (PIN) | Training Date

	TRAINEE FIRST AND LAST NAME	TRAINING TOPIC	TRAINEE SIGNATURE UPON COMPLETION OF TRAINING
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	TRAINEE FIRST AND LAST NAME	TRAINING TOPIC	TRAINEE SIGNATURE UPON COMPLETION OF TRAINING
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