

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

**Training Topics:** (specific description of equipment, product, item, situation or process)

**Instructional Materials Used:** (manuals, handouts, videos, discussion, hands-on)

**Instructor:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**In Attendance:** (Your signature below states that you have received and understood the information presented to you)

(Print Name)

(Signature)

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