

GROUP TRAINING GROUP

Trainer/Advisor:

Training Topic:

Method of Training:

Class Date:

Trainer/Advisor signature:

	First and Last Name	Traine Signature	Date	First and Last Name	Traine Signature	Date
1						11
2						12
3						13
4						14
5						15
6						16
7						17
8						18
9						19
10						20

Group Training Record Pg 2

	First and Last Name	Trainee Signature	Date	First and Last Name	Trainee Signature	Date
21				36		
22				37		
23				38		
24				39		
25				40		
26				41		
27				42		
28				43		
29				44		
30				45		
31				46		
32				47		
33				48		
34				49		
35				50		