TRAINING SIGN-IN SHEET TEMPLATE

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TRAINING INFORMATION	
PROGRAM NAME	
PROGRAM LEVEL	
LESSON PLAN REFERENCE	
PROGRAM REFERENCE	
TRAINING LOCATION	
TRAINING DATE	
TRAINING TIME	
TRAINER NAME	

STUDENT NAME	STUDENT SIGNATURE

* Your signature on this training sign-in sheet confirms your attendance during the program session specified above.

THIS SECTION TO BE FILLED OUT BY TRAINER

List any observations and/or comments below.



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