

Worker Trainer Log

Name of operation : _____ Date : _____

Trainer : _____ Training Time : _____

Location : _____

Subject of training session : _____

Training method : **Video** **Lecture** **Handout** **(Check all that apply)**

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

Please see the food safety plan for overall Worker Training Procedures.

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: