



### TRAINING REPORT

|           |  |              |  |
|-----------|--|--------------|--|
| Group     |  | Contact Name |  |
| Customer  |  |              |  |
| Address   |  |              |  |
| Post Code |  | Date         |  |

| CONTENT          |  | PRODUCTS COVERED |  |
|------------------|--|------------------|--|
| Product Handling |  |                  |  |
| Floorcare        |  |                  |  |
| Housekeeping     |  |                  |  |
| Washroom         |  |                  |  |
| Kitchen          |  |                  |  |
| Food Process     |  |                  |  |
| Handcare         |  |                  |  |
| Disinfectants    |  |                  |  |

### ATTENDANCE

I have attended and understood the training

|      |  |           |  |
|------|--|-----------|--|
| Name |  | Signature |  |
| Name |  | Signature |  |
| Name |  | Signature |  |
| Name |  | Signature |  |
| Name |  | Signature |  |
| Name |  | Signature |  |

|                         |  |
|-------------------------|--|
| Training carried out by |  |
| Company                 |  |