Safety training attendance sheet

Company / site: _____ **Location:** _____

Training topic: _____

Type of training: ☐ Initial ☐ Refresher ☐ Task-specific ☐ Other _____

Date: _____ **Start time:** _____ **End time:** _____

Instructor's name: _____

Role / qualification: _____ **Signature:** _____

No.	Full name	ID / passport / employee no.	Department / role	Signature
1				
2				
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Notes: _____

A free template from IL Safety Academy (ilsafety.com). A general template, not an official form — check the requirements that apply to your workplace.