## Departmental Training Attendance Form



Department:	
Training topic:	
Date:	
Duration:	
Trainer:	
Signature of Trainer:	
Signature of F&B Manager:	
Print Name & Surname	Signature
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
	<u> </u>