## (Name of department) Training Report (month, year)



## This form is completed by the HOD and sent to Training Manager (CC GM) on the first of each month

TO: Training Manager, CC General Manager

FROM

DATE:

DEPARTMENT HEAD: DEPARTMENT: DEPARTMENTAL TRAINER/S:

**ATTACHMENT:** Monthly Training Calendar for (next month)

## 1) Achievement of People Training Standard #3: Every employee receives regular skills training

KPI 3.1: Every employee receives 2- 4 hours departmental training per month

• Hours of departmental training per employee this month (not including new hire training)

KPI 3.2: Each HOD posts a monthly departmental training calendar by 26th of each month and forwards a brief monthly training report by 1st of each month

• Were calendars and reports posted and sent on time? Yes/No

KPI 3.3: Every department has a Departmental Manual of SOP's and Task Breakdowns - reviewed at least once per year

- Status of SOP Manual and Task Breakdowns level of completion
- 2) Positive Outcomes: (Anything great which happened, encouraging results or positive feedback.)
- 3) Issues: (Any problems, concerns or patterns of behaviour which need to be addressed.)

## PEOPLE TRAINING



**Training Hours Calculator** (double click the table and please don't move or add anything as it's a sensitive table ;) *PLEASE NOTE: do not include new hire training hours in the above table.* 

S/N	Name of session	Date	Number of attendees	Duration (minutes)	Total training hours
1					0
2					0
3					0
4					0
5					0
6					0
7					0
8					0
9					0
10					0
11					0
12					0
13					0
14					0
15					0
16					0
17					0
18					0
19					0
20					0
21					0
22					0
		Total	0	0	0
	Total number of department employees	Total average hou	Total average hours per employee		