

Name of session	Date	Number of attendees	Duration (minutes)	Number of staff hours
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
			Total number of staff hours trained	0.00

After filling in the information, [copy and paste this table](#) into your Monthly Departmental Training Report