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| <b>TRAINING REGISTRATION FORM</b> |
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|----------------------|--|-----------|--|
| Training name:       |  |           |  |
| Presenter/Trainer:   |  |           |  |
| Date:                |  | Location: |  |
| Schedule:            |  |           |  |
| Training objectives: |  |           |  |

Attendee's printed name:

Signature:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
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11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
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17. \_\_\_\_\_
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19. \_\_\_\_\_
20. \_\_\_\_\_

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By signing above, I the trainee have successfully completed training in the above training objectives.

***Please submit document to the HR department***



**TRAINING REGISTRATION FORM**

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| Training name:       |  |           |  |
| Presenter/Trainer:   |  |           |  |
| Date:                |  | Location: |  |
| Schedule:            |  |           |  |
| Training objectives: |  |           |  |

By signing above, I the trainee have successfully completed training in the above training objectives.

***Please submit document to the HR department.***

Attendee's printed name:

Signature:

- 21. \_\_\_\_\_
- 22. \_\_\_\_\_
- 23. \_\_\_\_\_
- 24. \_\_\_\_\_
- 25. \_\_\_\_\_
- 26. \_\_\_\_\_
- 27. \_\_\_\_\_
- 28. \_\_\_\_\_
- 29. \_\_\_\_\_
- 30. \_\_\_\_\_
- 31. \_\_\_\_\_
- 32. \_\_\_\_\_
- 33. \_\_\_\_\_
- 34. \_\_\_\_\_
- 35. \_\_\_\_\_
- 36. \_\_\_\_\_
- 37. \_\_\_\_\_

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By signing above, I the trainee have successfully completed training in the above training objectives.

***Please submit document to the HR department***



**TRAINING REGISTRATION FORM**

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|----------------------|--|-----------|--|
| Training name:       |  |           |  |
| Presenter/Trainer:   |  |           |  |
| Date:                |  | Location: |  |
| Schedule:            |  |           |  |
| Training objectives: |  |           |  |

- 38. \_\_\_\_\_
- 39. \_\_\_\_\_
- 40. \_\_\_\_\_
- 41. \_\_\_\_\_
- 42. \_\_\_\_\_
- 43. \_\_\_\_\_
- 44. \_\_\_\_\_
- 45. \_\_\_\_\_
- 46. \_\_\_\_\_
- 47. \_\_\_\_\_
- 48. \_\_\_\_\_
- 49. \_\_\_\_\_
- 50. \_\_\_\_\_
- 51. \_\_\_\_\_
- 52. \_\_\_\_\_
- 53. \_\_\_\_\_
- 54. \_\_\_\_\_

By signing above, I the trainee have successfully completed training in the above training objectives.

*Please submit document to the HR department*