**WORKER TRAINING LOG**

**Name and address of farm\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Trainer:** **Training time:**

**Topics Covered:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Training materials:** Please attach any printed materials related to the training.
Also reference any relevant SOPs or sections of the farm food safety plan that apply.

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| --- | --- | --- |
| **Training Date** | **Employee Name: Please Print** | **Employee Signature** *I received training, and policy documents and have had my questions answered in a language I understand. I agree to follow the policies.* |
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 **Signature of Trainer—***I provided training, and trainee demonstrated understanding of the topic*

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 signature date*

**Signature of Supervisor:** *I reviewed this record*

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