

### Appendix 2 – Training Record

Training Name:														
Person who delivered the training:											Date:			
Names of trainees	Test Results:		Performance Monitoring											
	Passed	Failed	3 months				6 months				12 months			
			NI	I	SI	Manager signature	NI	I	SI	Manager signature	NI	I	SI	Manager signature
<b>Total:</b>														
<b>Effectiveness [%]:</b>														

**Legend:**

- NI - "Passed" test - Trainee passed the final test
- I - "Failed" test - Trainee failed the test
- / - The training didn't have final test
- NI - "No Improvement," trainee hasn't shown improvement in areas covered by training
- I - "Improvement," trainee has shown improvement in areas covered by training

[organization name]

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☑ – "Significant improvement," trainee has shown significant improvement in areas covered by training

[job title]

[name]

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[signature]