On-the-job (OJT) Training Attendance Sheet Template

Trainee's Name: _____ Department (if any): _____

Supervisor's Name: _____ Employment Start Date: _____

S/N	Description of OJT element	Start Date	End Date	Supervisor's signature	Trainee's signature
1	Understanding individual department processes & workflow	12/4/2022	19/4/2022		
2	Aligning SSG terms & conditions to company policies	20/4/2022	27/4/2022		