

Production Operator Training Requirements

Format No.
Rev. No.
Rev. Date.

Document No.

Document Date

Employee Name :

Employee Division / Location / Area :

Machine / Equipment / Device Operating :

Date of Hire:

Supervisor / Manager :

Basic tasks

Tasks	Required? YES / NO	Frequency	Plan. Comp. Date	Actual Comp. Date	Updates

Supervisor / Manager General Comments:

Employee Sign.

Trainer Sign.

Supervisor / Manager Sign.