

Summary of Skills Training and Recommendations For Unlicensed Personnel

PROCEDURE _____ STUDENT _____

1 _____
Date Instructor _____ Person Trained _____ Position _____

Strengths of Trainee: _____

Weaknesses of Trainee: _____

Recommendations for follow-up and further training: _____

2 _____
Date Instructor _____ Person Trained _____ Position _____

Strengths of Trainee: _____

Weaknesses of Trainee: _____

Recommendations for follow-up and further training: _____

3 _____
Date Instructor _____ Person Trained _____ Position _____

Strengths of Trainee: _____

Weaknesses of Trainee: _____

Recommendations for follow-up and further training: _____

_____ Date

_____ *has not completed* the training required because _____

Recommendations for Further Training: _____

Signature of Person Trained Signature(s) of Instructor(s) Date

Witness Date

To be completed when the person has not or cannot master the skills in a timely manner.

Please excuse _____ of the responsibility to perform _____ on

_____ *Student*

_____ *Procedure*

Reason: _____

Signature Person Trained Signature(s) of Instructor(s) Date

Witness _____ Date _____