

# Staff training record

For each member of staff, fill in this record when they have been trained on a safe method and ask them to write their initials to say they have been trained.



Name:  
 Telephone no:  
 Address:

Safe method	Date	Initials
On first day:		
Personal hygiene		
Opening and closing checks		
Cross-contamination		
Cleaning		
Chilling		
Management		
Cooking and preparation (if relevant)		
Other training or retraining		

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