

Progressive Training™

(WA) Pty Ltd

Title:	Attendance Record and Trainer Assessor Feedback	FORM TA 3.21
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Date of Course/Training:

Course/Units:

Location:

Organisation / Client:

STUDENT DETAILS			DATE/S OF COURSE								
			NOTE: In matrix below enter Date of Course, Unit Code, and enter the number of hours the participant attended on that day in the box below.								
No	Surname	Given Names	Signature of attending participant I acknowledge that I have viewed the Progressive Training Introduction PowerPoint and am aware that Progressive Training are the Registered Training Organisation	Date:	Unit Code:	Date:	Unit Code:	Date:	Unit Code:	Date:	Unit Code:
				Hrs Completed:	Hrs Completed:	Hrs Completed:	Hrs Completed:	Hrs Completed:	Hrs Completed:		
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
Total Attendance per day											
Consultant's Name:											
Signature:											

Training Advisor and Address (to send certificates to):

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Issue Date:	July 2012	Code:	TA 3.21
Reviewed by:	Tanja Parry	Last Reviewed:	Sep 2020

Progressive Training TM

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Please complete this form during or at the end of each course and return to admin personnel with your other paperwork. Your feedback is invaluable in allowing us to continuously improve our services.

Course Name:		Date/s:	
Client:		Location:	

The Course
(E.g. What went well? Any issues with facilities/equipment, participants? Etc.)

Course Materials and Assessments	
(E.g. Any mistakes in resources? Comments made from participants, etc.)	
Material (E.g. Theory Assessment)	Comments

General Comments	
(E.g. Improvements, extra work opportunities, valuable contacts, etc.)	

Trainer/Assessor Name:			
Trainer/Assessor Signature:		Date:	