

MSIP Training Attendance List

- TLR®
- SMART®
- Combination
- Initial (Basic) Training
- Refresher Training

Date: _____	Location: _____
Length of Training (hours): _____	
Trainers: _____	

Participant's Name (please print legibly)	Site	Department
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		