Appendix A Welding, Cutting, Brazing Management Plan Training Log

chool District:	St Cloud Scl	100l District # 742	
raining Date:	<u>. </u>	<u> </u>	
raining Location:			
rrpose: (initial)			(annual)
		ol District employee, hav	
		Attendance Log	
Employee Nam	e(Printed)	Employee Signature	र्धाणितरा
	*-		
<u> </u>		1000	
			Trainer (Printed)
			Trainer (Signature)