

Staff Compliance Training Attendance Form

Date of Training:

YYYY-MM-DD

Location:

Enter location

Trainer's Name:

Enter trainer's name

Department:

Department name

Training Topic:

e.g., Data Privacy

Attendance Record

No.	Staff Name	Staff ID	Signature	Time In	Time Out
1					
2					
3					
4					
5					

Important Notes:

- This document must be retained for compliance verification and audits.
- All attendees must sign against their names to record attendance.
- Ensure accurate recording of training date, topic, and trainer.
- Incomplete attendance may affect compliance status of the department.
- Keep this form confidential and store securely as per company policy.