

Employee Training Certification Record Form

Employee Information

Name:

Employee ID:

Department:

Position/Title:

Supervisor:

Training Record

Training Title	Provider/Instructor	Date Completed	Certificate #	Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Employee/Instructor Certification

Employee Signature:

Date:

Instructor/Supervisor Signature:

Date:

Important Notes

- This document provides an official record of all certifications and trainings completed by the employee.
- It should be updated promptly after each new training or recertification.
- Keep this form for compliance and audit purposes; retention requirements may vary by organization or regulation.
- Verify the authenticity of certificates and maintain copies as references.
- Expired certifications must be renewed as required by company policy and regulatory bodies.