

Manufacturing Shift Change Training Handover Log

Date:

Shift:

e.g. Day / Night

Outgoing Operator Name:

Incoming Operator Name:

Topic / Area	Details / Notes
Inventory / Materials	
Equipment Status	
Safety Issues	
Quality Control	
Pending Tasks / Instructions	
Other Notes	

Training Topics Covered (if any):

Outgoing Operator Signature:

Incoming Operator Signature: