

Allergen Awareness Training Attendance Sheet

For Restaurant Workers

Restaurant Name: _____

Trainer Name: _____

Date: _____

Location: _____

No.	Employee Name	Job Title	Signature	Time In	Time Out
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Note: Keep this record for compliance and future reference.