

# Bartender Skills Training Attendance

## Training Details

Restaurant Name: \_\_\_\_\_

Training Date: \_\_\_\_\_

Training Module: \_\_\_\_\_

Instructor: \_\_\_\_\_

## Attendees

No.	Bartender Name	Position	Signature
1			
2			
3			
4			
5			

---

Trainer's Signature

---

Manager's Signature