# TRAINER REPORT

|  |  |
| --- | --- |
| Course |  |
| Date |  |
| Venue |  |
| Trainer |  |
| No of Participants |  |

**Course Outline / Timings**

|  |  |  |
| --- | --- | --- |
| Topic | Timing | Comments |
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|  |  |  |
|  |  |  |
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**Equality Statement Tick**

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| --- | --- |
| 1. Trainer has discussed classroom agreement with trainees
 |  |
| 1. Classroom agreement outlines equality and respect each other
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**Health & Safety Tick**

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| --- | --- |
| 1. Trainer has read and advised trainees of venue health & safety and fire exits
 |  |
| 1. Trainer has advised trainees of general house keeping
 |  |
| 1. Trainer has advised trainees of facilities and breaks
 |  |

**Evaluations Tick**

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| --- | --- |
| 1. Trainer has ensured trainees have completed a course evaluation sheet
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| 1. Trainer has completed a Trainer Report
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**Facilities Comments**

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| --- | --- |
| 1. Room / Layout / Seating
 |  |
| 1. Access / Egress
 |  |
| 1. Security
 |  |
| 1. Heating / Lighting / Ventilation
 |  |
| 1. Resources
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| 1. Would you recommend this location for future training? Please specify
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**Issues / Comments**

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|  |

Signed:

Date:

Print Name:

Company: