ON JOB TRAINING FORM

Staff Name	:	
Designation	:	
Company/Department	:	
Supervisor's Name	:	

Purpose of Training *(Please explain briefly)*
1. The purpose of OJT is to prepare newcomers for his/her position as **NON-APPLICABLE**. The instruction and hands-on practice you completed is part of the training that can help you develop the skills, competencies and knowledge you need to carry out your role at the company or organization. 2. On-the-job training allows employees to adapt to other processes of workflow in situations very similar to those they will encounter on a daily basis. Employees will use the same tools and equipment they need for their job while being guided by an experienced supervisor.

	Please list down On-The-Job training plan below			
Date	**Hours**	**Training Description**	**Staff Signature**	**Supervisor Signature**

- **Once OJT completed, please pass the form to HR Department**

Received by: **Human Resource Department**
Initial: Name: Date: