

# STA TRAINING SDN BHD

Registration No.: 200201007373 (575036-M)

## Form 2

(Revision 2,2021)

### Attendance Form

Program: Operator Training Programme

Name of Course: \_\_\_\_\_

Trainer: \_\_\_\_\_

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

Name of Company/Organisation : \_\_\_\_\_

Training Venue : \_\_\_\_\_

Participant(s):

		Date:				
		Unit Standard No.:				
No.	Candidate Full Name	Signature	Signature	Signature	Signature	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Prepared by:

Verified by:

\_\_\_\_\_  
Signature of Trainer:  
( )

Date:

\_\_\_\_\_  
Signature of Camp Manager:  
( )

Date:

**Note:** This form **MUST be signed** during the training being conducted.  
Original form **MUST** be returned to STA Training Sdn Bhd.  
Copy to: Camp File and Company/OrganisationHQ.