

Date of Report:				Recommended Training Requirement (Please Tick)																						Decision made during Management Review													
No.	Name	Appointment	Date Joined	Project management	Contracts management	Management Techniques	Leadership	Corporate Directorship	Communication	Interpersonal skills	MS Outlook	MS PowerPoint	Advanced Word	Advanced Excel	AutoCAD	Photoshop	MS Access	MS Project	ICS Accounting	Budgeting	Finance	Taxation	Restaurant management	Franchising Concept	Furniture Manufacturing		Creative design	ISO 9000	ACMV technical training	Products knowledge	IEM electrical design	Worksite safety	Other:	Other:	Other:	Other:	Other:		
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Prepared by: Signature: Name: Appointment: HR Manager Date:	Verified by: Signature: Name: Appointment: ISO Manager Date:	Approved by: Signature: Name: Appointment: MD Date:	Recorded by: Signature: Name: Appointment: HR Executive Date:
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