



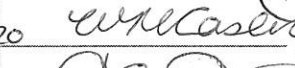







5. Risk assessment training

Complete to demonstrate evidence that all employees have been trained in this risk assessment

Name	Job title	Date of Training	Signature
Jane Hardingham	Rest Manager	DD/MM/YYYY 03/07/2020	
Nicola Fountain	SALES EXEC	DD/MM/YYYY 03/07/2020	
Drew Anderson	F&D Supervisor	DD/MM/YYYY 03/07/2020	
Clare Allen	Rec	DD/MM/YYYY 3/7/2020	
Wendy Casling	Receptionist	DD/MM/YYYY 28-07 03/07/20	
Angela Farnon	Rest Supervisor	DD/MM/YYYY 02.07.20	
Erik White	Night Manager	DD/MM/YYYY 3-7-20	
EMILY DALTON	CDP	DD/MM/YYYY 3/7/20	
JAMES ADAMS	Sous chef	DD/MM/YYYY 3/7/20	
Angela Farnon	Rest Supervisor	DD/MM/YYYY 03.07.20	
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