

Course Title:	
Trainer(s):	
Trainer Qualifications:	
Date Developed:	Updated Date:
Prepared By:	Length of Training:
Recommended Maximum Number of Trainees:	Module being instructed:
Classroom Set-up:	Trainer Materials:
Handouts /Videos:	Testing: <input type="checkbox"/> MCT <input type="checkbox"/> WST <input type="checkbox"/> BST
Classroom/Facility Equipment Requirements:	Facility/Room Contact:
Course Summary:	
Notes:	

Performance Objectives:

At the end of this training, trainees will be able to:

Time Begin to End (24 Hour)	Performance Objective (WST/ BST)	PowerPoint Slides/Notes	Trainer's Script