

Add Name to Employee Phone List

8/4/20

Location: Alpha
Date/Hours of Training for Orientation: 7/20/20 4 hours
Date/Hours Shadow Shift 1: 8/20/20 8 hours
Date/Hours Shadow Shift 2: 8/26/20 8 hours
Date/Hours Shadow Shift 3: 8/30/20 8 hours

Location: Omega
Date/Hours of Training for Orientation: 1-31-22 18min
Date/Hours Shadow Shift 1: 1-12-22 6hr 1min
Date/Hours Shadow Shift 2: 3/7/22 7hr
Date/Hours Shadow Shift 3: _____

Location: _____
Date/Hours of Training for Orientation: _____
Date/Hours Shadow Shift 1: _____
Date/Hours Shadow Shift 2: _____
Date/Hours Shadow Shift 3: _____

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