

Add Name to Employee Phone List

OR 5/27/22

Location: Spiriti

Date/Hours of Training for Orientation: \_\_\_\_\_

Date/Hours Shadow Shift 1: 10am-4pm 5/28/22

Date/Hours Shadow Shift 2: 1-6pm 5/29/22

Date/Hours Shadow Shift 3: ~~3-10pm 5/31/22~~

Location: Beta

Date/Hours of Training for Orientation: 6/8 6hr

Date/Hours Shadow Shift 1: 6/9 5.5hr

6/14 7hr

Date/Hours Shadow Shift 2: 6/10 2hr

Date/Hours Shadow Shift 3: 6/13 2hr

Location: \_\_\_\_\_

Date/Hours of Training for Orientation: \_\_\_\_\_

Date/Hours Shadow Shift 1: \_\_\_\_\_

Date/Hours Shadow Shift 2: \_\_\_\_\_

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: \_\_\_\_\_

Location: \_\_\_\_\_

Date/Hours of Training for Orientation: \_\_\_\_\_

Date/Hours Shadow Shift 1: \_\_\_\_\_

Date/Hours Shadow Shift 2: \_\_\_\_\_

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: \_\_\_\_\_

Location: \_\_\_\_\_

Date/Hours of Training for Orientation: \_\_\_\_\_

Date/Hours Shadow Shift 1: \_\_\_\_\_

Date/Hours Shadow Shift 2: \_\_\_\_\_

Date/Hours Shadow Shift 3: \_\_\_\_\_