

Structured On-the-Job Training Agreement

Employee Name: _____

Employee ID: _____

Job Title/Position: _____

Department: _____

Trainer/Supervisor: _____

Training Period: _____

Location: _____

Training Objectives

Planned Training Activities

1. _____
2. _____
3. _____

Responsibilities

- Employee agrees to actively participate in the training as scheduled.
- Trainer/Supervisor will provide guidance, feedback, and necessary resources.
- Both parties will record progress and address any challenges encountered.

Evaluation & Completion

- Progress will be reviewed on a regular basis during the training period.
- Training will be considered complete upon satisfactory achievement of objectives.

Employee Signature

Trainer/Supervisor Signature

Date: _____