|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Training Plan form** | | | | | | | |
|  | | | | **Date\*：** | | | |
| **Year\*:** | | | | | | | |
| **NO.** | **Type\*** | **Planned Time\*** | **Class Name\*** | | **Hours\*** | **Participants/departments\*** | **Remark** |
|  |  |  |  | |  |  |  |