CONDEA Vista Company

Training Record Form

Course Name Accident Investigation
① Caustic Burn
② VCM Sphere Release

Course Code: _____ Session #: _____

Start Date: August 27, 1999 End Date: August 27, 1999

Start Time: 8:00 A.M. End Time: 9:00 A.M.

Duration: 1 hrs.

Min/Max Students: _____

Facility (Plant): Aberdeen

Meeting Room/Floor: Auditorium

Contact Phone # (662) 369-3621

Instructor ID JHEGW Instr. Name: Joseph B. Hegwood

Novell ID	Name (Please Print)	Signature	Grade
	DIANN Ewing	Diann Ewing	
	Charles Clayton	Charles Clayton	
	Anthony Gettis	Anthony Gettis	
	Clarence Burnett	Clarence Burnett	
	Lois Luker	Lois Luker	
	Eva Lee	Eva Lee	
	Bobby Fair	Bobby Fair	
	Sam Schrock Jr.	Sam Schrock	
	Robert Irvin	Robert Irvin	
	Todd Irvin	Todd Irvin	
	Malcolm Walker	Malcolm Walker	
	George Perkins	Leo Const.	
	Robert Hogan	Robert Hogan	
	Michael Clopton	Michael Clopton	

All names and Novell ID's must be legible for credit. Send copy of this Training Record to the Training Coordinator.

G:training\signin

Revision 7/22/97

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Novell ID	Name (Please Print)	Signature	Grade
CS408	JACOB LEE J	[signature]	
C40517	WANDA Schrock	[signature]	

All names and Novell ID's must be legible for credit. Send copy of this Training Record to the Training Coordinator.

G:training\signin