

**ATTACHMENT 2  
TRAINING SCHEDULE AND PLAN**

<b>TRAINING SCHEDULE AND PLAN</b>	
In addition to listing specific and other related information as shown below, attach a resume of each instructor. This format will be used for all training: initial and on-the-job.	
DATE:	
TIME:	
SUBJECT:	
NAME OF TRAINING FACILITY:	
ADDRESS:	
DAY:	
MONTH:	
FROM:	TO:
DESCRIBE SUBJECT-USE SHORT PARAGRAPH:	
INSTRUCTORS:	
FACILITY:	
ADDRESS:	
REMARKS:	