

**Certificate of Training**

**This Certifies that**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Has completed the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ training course for**

**WRITE TITLE OF TRAINING COURSE HERE**

**And is Awarded this Certificate By**

**COMPANY NAME HERE**

**Date: \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Authorized Signatures***