Date Updated: _____

Animal Welfare
Employee Training Record Sheet

_____

Dairy Facility Name

TRAINING AREAS: (check indicates employee has received training)	**EMPLOYEE NAME:**							
Emergency Response								
Proper Handling & Movement of Animals								
Feed & Water Safety								
Proper Milking Protocol								
Vaccination Schedule & Protocols								
Proper Calving Techniques								
Dehorning Protocol								
Castration Protocol								
Downer Cow Care								
Euthanasia Protocol								
Lameness Scoring								
Hock Scoring								
Body Condition Scoring								
Cleanliness Scoring								

Date Updated: ______________

	EMPLOYEE NAME:							
TRAINING AREAS: (check indicates employee has received training)								