

Personnel Training Plan – Technical

Employee / Subcontractor Name _____

1 Basic Training Coverage – Mandatory Items

Note: For existing technicians transferring from another APC branch, this list should also be covered to ensure that compliance with company requirements is reinforced (and make sure that relevant skills are up-to-date with current policy and procedure).

Topic	Date Planned	Date Completed	<input checked="" type="checkbox"/> Done	Instructions / Points Covered
Training Courses				
			<input type="checkbox"/>	APCT10 - 90104 Amalgamised Course (General Pests)
			<input type="checkbox"/>	APCT10 - 90204 Amalgamised Course (Timber Pests)
PPE / Equipment			<input type="checkbox"/>	V271-1 Uniform Policy
			<input type="checkbox"/>	V271-3 Equipment Usage Policy
			<input type="checkbox"/>	V271-5 Ladder Safety Policy
			<input type="checkbox"/>	V274 Personal Protective Equipment Policy
			<input type="checkbox"/>	P279 Treatment - Roof Voids
			<input type="checkbox"/>	P277 Equipment - Amalgamiser
			<input type="checkbox"/>	P280 Equipment - Dusting Machine
			<input type="checkbox"/>	P282 Equipment - Compressor
			<input type="checkbox"/>	P283 Equipment - Hand Puffer
			<input type="checkbox"/>	P284 Equipment - Power Sprayer
Chemicals				
			<input type="checkbox"/>	V271-2 Chemical Usage Policy
Client Service				
			<input type="checkbox"/>	P276 Customer Relations
Pest Treatments			<input type="checkbox"/>	Flea Treatment DVD and Questionnaire
			<input type="checkbox"/>	P278 Treatment - Cockroaches
			<input type="checkbox"/>	P286 Treatment – Baiting
			<input type="checkbox"/>	P287 Treatment - Ants
			<input type="checkbox"/>	P288 Treatment – Spiders
			<input type="checkbox"/>	P289 Treatment – Fleas
			<input type="checkbox"/>	P290 Treatment – Rodents
Toolbox Talks				
			<input type="checkbox"/>	Working Around Asbestos

2 Additional Training (Depending on Training Need)

2.1 Training Needs Analysis – Questionnaire

Determine the main aspects of what the technician has actually been doing in the workplace, as well as their knowledge of the company.

Overall Comments (Attach interview notes where applicable):

- Questions about chemicals
- Questions about Pest Ids, Biology etc
- Questions about treatments
- Questions about LLN

2.2 Basic Policy / Procedure

Topic	Date Planned	Date Completed	<input checked="" type="checkbox"/> Done	Instructions / Points Covered
Toolbox Talks			<input type="checkbox"/>	BP Contractor Management
			<input type="checkbox"/>	Equipment and PPE Maintenance Logs
			<input type="checkbox"/>	Mosquito and Midge Proc Policy
			<input type="checkbox"/>	Power Sprayer
			<input type="checkbox"/>	Safe Driving
			<input type="checkbox"/>	Safe Work Method Statements
PPE / Equipment			<input type="checkbox"/>	P285 Equipment - Pestigas
			<input type="checkbox"/>	P301 Equipment - APC Foaming Unit
Pest Treatments			<input type="checkbox"/>	P291 Treatment - Bed Bugs
			<input type="checkbox"/>	P292 Treatment - Mosquitoes and Midges
			<input type="checkbox"/>	P297 Treatment - Fabric Pests
			<input type="checkbox"/>	P299 Treatment - Ticks
			<input type="checkbox"/>	P300 Treatment - Bird Mites
			<input type="checkbox"/>	P302 Treatment - Drain Flies
Specialty Situations			<input type="checkbox"/>	P293 Treatment - Service Stations
			<input type="checkbox"/>	P281 Aircraft Disinsection
Client Specific Requirements (e.g. Inductions)			<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	

2.3 Formal Training / Accreditation Options

Topic	Date Planned	Date Completed	<input checked="" type="checkbox"/> Done	Instructions / Points Covered
APC TRAINING			<input type="checkbox"/>	APCT10104 – Introduction to Pest Management (Units 5, 6 & 18)
			<input type="checkbox"/>	APCT10204 – Timber Pest Management (Units 8 & 10)
			<input type="checkbox"/>	APCT20104 – WPCG Work Clearance for Contractors
			<input type="checkbox"/>	APCT20204 – Reticulation System Accreditation
			<input type="checkbox"/>	APCT20304 – Physical Barrier System Accreditation
			<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	
Other Accreditations			<input type="checkbox"/>	Kordon
			<input type="checkbox"/>	Homeguard
			<input type="checkbox"/>	Exterra
			<input type="checkbox"/>	ReTerM
			<input type="checkbox"/>	Termidor Dusting
			<input type="checkbox"/>	Termseal
			<input type="checkbox"/>	
			<input type="checkbox"/>	

NOTE: File this form in the personnel file.