



Saskatchewan Association for  
Safe Workplaces in Health



## Professional Assault Response Training (PART®) program® Attendance List

Check the applicable session: ☐ Level Three® ☐ Level Four® ☐ Level Five®

Check the applicable level of training: ☐ Initial ☐ Re-evaluation

Date: \_\_\_\_\_ Length of Session: \_\_\_\_\_

PART® Certified Trainer

Name(s): \_\_\_\_\_

Name	Title/Department	Employer	Level
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

A copy of this attendance list should be retained and readily available in the event it is requested by SASWH. Successful completion requires the participant to demonstrate an understanding of the program through a hands-on return demonstration to the PART® trainer.