

TRAINING REFLECTION			<b><u>ATELIER HAIR</u></b>			
WEEK COMMENCING:			SOPHIE MAULER: Training Reflection Notes			
	DATE:	TIME:	STYLIST NAME:	CLIENT NAME:	SERVICES:	PRODUCTS
1						
2						
3						
4						

REFLECTION NOTES	
NOTES	QUESTIONS / ACTIONS
1	
2	

**REFLECTION NOTES**

NOTES		QUESTIONS / ACTIONS
<b>3</b>		
<b>4</b>		

**WEEKLY ACTIVITIES CHECKLIST -**

ACTIVITY	COMPLETED	COMMENTS/FEEDBACK
<b>1</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		
<b>5</b>		

**SIGN OFF**

Employee Signature:		Date:	
Senior Stylist Signature:		Date:	
Owner Signature:		Date:	