



Training Form

Subject of the training:		GXCDIFFICILE-10, GXCDIFF/EPI-10 and GXCARBAR-10	
Date:		19APR2023	
Document(s) and Revision(s) #: (or attach separate list)		D10643 Rev. FE, D52942 Ref F	
Other Training Materials: (Change Order#, NC#, PDR#, etc.)		D63374, D63375, D63376, D63377, D63378, D63379	<input type="checkbox"/> N/A
Location of Training:		Online (Teams)	<input type="checkbox"/> N/A
Trainer:	Derek Hamilton		<input type="checkbox"/> N/A
	<i>Print Name</i>	<i>Signature</i>	
Duration:	Applicable for employees in California locations working in the Manufacturing and Logistics functions and/or for Instructor-Lead Training (ILT) ≥30 minutes in duration.		
	START TIME	END TIME	DURATION Use [HH:MM] format
	3:30PM	4:00PM	00:30
			<input type="checkbox"/> N/A

Signing below indicates that you have received the training as described and fully understand the content presented.
If you have further questions on materials provided, contact your Supervisor or Trainer.
 This Training Form may be uploaded into the LMS by an LMS Administrator or archived (if appropriate) by the applicable individual.

	Print Name	Sign Name	Cepheid email
			Check if applicable: <input checked="" type="checkbox"/> @cepheid.com <input type="checkbox"/> @cepheid.se
1*	Theresa Moreno		theresa.moreno
2	Karla Camarena		Karla.Camarena
3	Crystal Syseglath		crystal.syseglath
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* If using the Form for documenting Individual/Self-Training, the Trainee completes Row 1 (the remaining rows are not applicable).