

**01 79 25 – DEMONSTRATION AND TRAINING VERIFICATION**

**PART 1 - GENERAL**

**1.01 INSTRUCTIONS**

- A. Use a copy of this page as a planning form for demonstrations and training. Fill in the basic identifying information below:

SBC Project Number: _____ Institution/Location: _____ Project Name: _____	Required date of Substantial
Owner's Facility Coordinator: _____ Phone: _____ Owner's Maintenance Contact: _____ Phone: _____ Contractor Contact: _____ Phone: _____	

- B. If a list of required demonstrations and training has been specified in Division 1, use that list as a starting point, review the project manual for other specifications that require training of the Owner's operators, and complete the list below. Check the box on left if Demonstration and Training is required on the standard listed subjects; add subjects as identified by review of the specifications and check the box to the left of each; and, schedule and indicate a target date for each. If the number of training subjects exceeds the available space provided here, replace or continue the list on a similarly formatted separate page. Submit the list with the initial Progress Schedule, and update as necessary during the Work to ensure that advance notice of the demonstration and training schedule is acceptable to the Designer.

Spec Reference	Subject	Target Date	Actual Date
	Accessibility		
	Boiler		
	Chiller		
	Controls		
	Data Transmission		
	Electrical		
	Elevator / Conveying		
	Fire Alarm		
	Irrigation		
	Mechanical		
	Plumbing		
	Telecommunications		

**01 79 25 – DEMONSTRATION AND TRAINING VERIFICATION**

**1.02 TRAINING VERIFICATION REPORT**

For each session conducted, use this page as a training verification report. Fill in the information below prior to the session. "End Time" may be filled in after.

SBC Project Number: \_\_\_\_\_

Institution/Location: \_\_\_\_\_

Project Name: \_\_\_\_\_

Subject Equipment / System:	
Spec Reference	

Demonstration and Training (by whom, where, when)	Trainer Name:	Company:		Phone:
	Place:	Date:	Start Time:	End Time:

**A. Minimum Agenda Requirements:**

- System Walk-through
  Operation
  Trouble-shooting
  Maintenance
  Safety

**B. Attendance:** Each person receiving the demonstration and training shall sign in below, or on a similarly formatted continuation page:

Initials	Legibly print your name	Unit and title or function

END OF SECTION