

**Training Certificate  
Safety Management Systems**Trainees Name: Alesja BauerDepartment: Passenger ServicesInitial / Recurrent

Training Modules	
1.	Course Requirements
2	Introductions
3	Principles of safety Management Systems
4	Responsible parties for Safety Management
5	Your role in Safety Investigations

**Trainee's Declaration:**

"I have received full instruction/ training of the above operational procedures and I fully understand the training that I have been given"

Trainee's Signature: Pm Date: 09.02.23**Trainers / Instructors Declaration:**

"I certify that the above named employee has received full instruction, training and has access to a copy of the procedures in this field of operation.

Trainer/Instructors Name: Goran KatarinicTrainer/Instructor's Signature: GKDate: 09.02.23