

Save Every Mile Training Program Checklist

TRAINER NAME: _____ SIGNATURE: _____ CELL PHONE #: _____	EMPLOYEE NAME: _____ SIGNATURE: _____ CELL PHONE #: _____
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STORE MANAGER: _____ **TRAINING START DATE:** _____

TO EARN YOUR BONUS TRAINING POINTS:

Ensure that each Program Detail has been reviewed, and all boxes and initials completed.

Email completed form to bnolan@clarkbrands.com

PROGRAM DETAILS	DATE COMPLETED	TRAINER INITIALS	EMPLOYEE INITIALS	TWO-WEEK CHECK IN COMPLETE
Program Overview				
Program Benefits				
Downloading the App				
Customer Enrollment				
Navigating the App				
Introductory Offer at the Pump				
Ongoing Cents off at the Pump				
Introductory Offer in the Store				
Earning Points in the Store				
Transferring Points in the App				
Monthly Offers				
Redeeming Cents off at the Pump				
Ringing Purchase in the Store Using Points				
POS Testing				
POP at the Site				