

Training Credit Summary

Programs with multiple license holders may complete this together on one form – just make sure both license holders view the videos, sign and date the form. By signing the form you are acknowledging this to be true. Return the completed form(s) to the licensor to verify completion – additional certification is not required.

Name:

Date:

What Training did you complete? –

If a video, how long was it? –

Provide a summary of the key concepts that you learned. –

How do you intend to utilize what you learned as a foster care provider? –

Would you recommend this training to someone else? Why or why not? –

_____ **Training Credits**