



Training Acknowledgment

Employee Name: B. Gross Policy/Procedure/Topic: intervention for sexually inappropriate behaviors, on call HM, COVID, you use, cell phone

Trained By: Kaitlyn Couturier Date Trained: 9/2/2020

I acknowledge that I have received training on the above topic, along with supporting policies, forms and procedures.

I understand that it is my responsibility to adhere to the requirements of the training fully, and if I do not understand my responsibility or need clarification, I will seek immediate assistance from a Home Manager in order to act in accordance with state policy, procedures and company expectations.

I understand that this Training Acknowledgment will become part of my permanent employment record, and that failure to apply the principles I was taught in my training will result disciplinary action, up to and including my termination of employment for failure to follow company policy.

B. Gross

Employee Signature

9/2/20

Date

Kaitlyn Couturier

Home Manager Signature

9/2/20

Date

Kaitlyn Couturier, LMSW

9/2/20

Copy to Employee
Copy to Employee Personnel File/HR