BEACON
Specialized Living

Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Breaks

Trained By: Angie Stelts Date Trained: 9-1-20

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.

Priscilla Hansen
Employee Signature

09-1-20
Date

Angie Stelts
Home Manager Signature

9-1-20
Date

Copy to Employee
Copy to Employee Personnel File/HR

BEACON
Specialized Living

Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Documentation

Trained By: Angie Stults Date Trained: 9-1-20

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.

Priscilla Hansen
Employee Signature

09-1-20
Date

Angie Stults
Home Manager Signature

9-1-20
Date

Copy to Employee
Copy to Employee Personnel File/HR

BEACON
Specialized Living

Training Acknowledgment

Documenting correctly on menu

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Following menu

Trained By: Anya Stiles Date Trained: 9.1.20

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.

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Priscilla Hansen
Employee Signature

09-1-20
Date

Anya Stiles
Home Manager Signature

9.1.20
Date

Copy to Employee
Copy to Employee Personnel File/HR

BEACON
Specialized Living

Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Gossip

Trained By: Angie Stelw Date Trained: 9.1.20

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.

Priscilla Hansen — *Employee Signature*

09-1-20 — *Date*

Angie Stelw — *Home Manager Signature*

9.1.20 — *Date*

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Specialized Living

Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Resident BTP

Trained By: Anne Stiles Date Trained: 9.1.20

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.

Priscilla Hansen
Employee Signature

09-1-20
Date

Anne Stiles
Home Manager Signature

9.1.20
Date

Copy to Employee
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Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Cleaning duties

Trained By: Anya Stiles Date Trained: 9.1.20

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.

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Priscilla Hansen
Employee Signature

9-1-20
Date

Anya Stiles
Home Manager Signature

9.1.20
Date

Copy to Employee
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Specialized Living

Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: On-Call Procedure

Trained By: Angie Stiles Date Trained: 9.1.20

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.

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Priscilla Hansen
Employee Signature

09-1-20
Date

Angie Stiles
Home Manager Signature

9.1.20
Date

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Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Attendance Work Schedule

Trained By: Angie Stiles Date Trained: 9.1.20

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.

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Priscilla Hansen
Employee Signature

09-1-20
Date

Angie Stiles
Home Manager Signature

9.1.20
Date

Copy to Employee
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Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Cell phone

Trained By: Angie Stiles Date Trained: 9.1.20

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.

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Priscilla Hansen
Employee Signature

09-1-20
Date

Angie Stiles
Home Manager Signature

9.1.20
Date

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Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Medication Documentation / Medication Administration

Trained By: Amy Stiles Date Trained: 9.1.20

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.

Priscilla Hansen — Employee Signature — Date: 09-1-20

Amy Stiles — Home Manager Signature — Date: 9.1.20

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Specialized Living

Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Sleeping on shift

Trained By: Angie Stiles Date Trained: 9-1-20

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.

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Priscilla Hansen
Employee Signature

09-1-20
Date

Angie Stiles
Home Manager Signature

9.1.20
Date

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Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Cleaning Van Van Mileage

Trained By: Anne Stiles Date Trained: 9-1-20

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.

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Priscilla Hansen
Employee Signature

09-1-20
Date

Anne Stiles
Home Manager Signature

9-1-20
Date

Copy to Employee
Copy to Employee Personnel File/HR

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Training Acknowledgment

Employee Name: Priscilla Hansen Policy/Procedure/Topic: Screening Visitor

Trained By: Angie Stiles Date Trained: 9.1.20

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.

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Priscilla Hansen
Employee Signature

09.1.20
Date

Angie Stiles
Home Manager Signature

9.1.20
Date

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