



Training Acknowledgment

Employee Name: Alexus Stirling Policy/Procedure/Topic: See below
 Trained By: Joe W Date Trained: 6/30/21

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.

Alexus Stirling
 Employee Signature

6/30/21
 Date

Joe W
 Home Manager Signature

6-30-2021
 Date

Copy to Employee
 Copy to Employee Personnel File/HR

- MKNP
- Medications
- Flow books
- OKAM
- EOL
- Charting
- emails
- temp. logs
- interacting w/ residents
- schedule
- 2nd verification
- Cell phones
- activities
- temps to pam
- uniforms + badges
- time + attendance
- requesting time off
- clinical/medical
- calls to manager
- van - cleaning/checklist
- leveling up