



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Dana Fancher Policy/Procedure/Topic: Behavior Plan Policy
Trained By: Kristin R Slack Date Trained: 10/28/21

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.

Dana Fancher
Employee Signature

10/28/21
Date

Kristin R Slack
Home Manager Signature

10/28/21
Date

Copy to Employee
Copy to Employee Personnel File/HR



Training Acknowledgment

Employee Name: Dana Farcher Policy/Procedure/Topic: Resident Security Policy ^{EC-012}
Trained By: Kristin R Slatt Date Trained: 10-28-21

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.

Dana Farcher
Employee Signature

10/28/21
Date

Kristin R Slatt
Home Manager Signature

10/28/21
Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Dana Fancher CT-003
Policy/Procedure/Topic: Resident Security Policy
Trained By: Krista R. Stach Date Trained: 10/28/21

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.

Dana Fancher
Employee Signature

10/28/21
Date

Krista R. Stach
Home Manager Signature

10/28/21
Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Dana Fancher Policy/Procedure/Topic: 1:1 Staffing Duties policy
Trained By: Krista R Slaw Date Trained: 10/28/21

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.

Dana Fancher
Employee Signature

10/28/21
Date

Krista R Slaw
Home Manager Signature

10/28/21
Date

Copy to Employee
Copy to Employee Personnel File/HR