



Training Acknowledgment

Employee Name: Kim Howard Policy/Procedure/Topic: On call protocol

Trained By: Tony Giancaspro/ Kim Howard Date Trained: 1-18-2022

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.

Employee Signature

Date

Home Manager Signature

Date

Copy to Employee
Copy to Employee Personnel File/HR



Training Acknowledgment

Employee Name: Kim Howard Policy/Procedure/Topic: Dignity and respect
Trained By: Tony Giancaspro/ Kim Howard Date Trained: 1-18-2022

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.

Employee Signature

Date

Home Manager Signature

Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Kim Howard Policy/Procedure/Topic: Personal electronic

Trained By: Tony Giancaspro/ Kim Howard Date Trained: 1-18-2022

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.

Employee Signature

Date

Home Manager Signature

Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Kim Howard Policy/Procedure/Topic: Documentation

Trained By: Tony Giancaspro/ Kim Howard Date Trained: 1-18-2022

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.

Employee Signature

Date

Home Manager Signature

Date

Copy to Employee
Copy to Employee Personnel File/HR



Training Acknowledgment

Employee Name: Kim Howard Policy/Procedure/Topic: Cell phones

Trained By: Tony Giancaspro Date Trained: 1-18-2022

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.

Employee Signature

Date

Home Manager Signature

Date

Copy to Employee
Copy to Employee Personnel File/HR