



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Joyce Fletcher Policy/Procedure/Topic: EOC BOOK

Trained By: Angela Cough Date Trained: 2-1-22

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.

Joyce Fletcher
Employee Signature

2-1-22
Date

Angela Cough
Home Manager Signature

2-1-22
Date

Copy to Employee
Copy to Employee Personnel File/HR



Training Acknowledgment

Employee Name: Joyce Fletcher Policy/Procedure/Topic: Clarity

Trained By: Angela Cough Date Trained: 2.1.22

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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Joyce Fletcher
Employee Signature

2.1.22
Date

Angela Cough
Home Manager Signature

2.1.22
Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Joyce Fletcher

Policy/Procedure/Topic: morning shift

Trained By: Angela Cough

Date Trained: 2-1-22

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

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Joyce Fletcher
Employee Signature

2-1-22
Date

Angela Cough
Home Manager Signature

2-1-22
Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Joyce Fletcher

Policy/Procedure/Topic: Home Manager Check List

Trained By: Angela Cough

Date Trained: 1/31/22

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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Joyce Fletcher
Employee Signature

1-31-22
Date

Angela Cough
Home Manager Signature

1-31-22
Date

Copy to Employee
Copy to Employee Personnel File/HR



Training Acknowledgment

Employee Name: Joyce Fletcher Policy/Procedure/Topic: TMH
Trained By: Angela Cough Date Trained: 1-31-22

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

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Joyce Fletcher
Employee Signature

1-31-22
Date

Angela Cough
Home Manager Signature

1-31-22
Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Joyce Fletcher Policy/Procedure/Topic: Home monthly uploads Incident Reports
Trained By: Angela Cough Date Trained: 2-1-22

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

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Joyce Fletcher
Employee Signature

2-1-22
Date

Angela Cough
Home Manager Signature

2-1-22
Date

Copy to Employee
Copy to Employee Personnel File/HR



BEACON
Specialized Living

Training Acknowledgment

Employee Name: Joyce Fletcher

Policy/Procedure/Topic: STAR-training

Trained By: Angela Cough

Date Trained: 2.1.22

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

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Joyce Fletcher
Employee Signature

2.1.22
Date

Angela Cough
Home Manager Signature

2.1.22
Date

Copy to Employee
Copy to Employee Personnel File/HR