



Training Acknowledgment

Employee Name: Darvin Moore Policy/Procedure/Topic: Catheter Care

Trained By: Kaitlynn Taylor Date Trained: 4/13/2022

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.

A handwritten signature in black ink, appearing to read "Darvin Moore", written over a horizontal line.

Employee Signature

A handwritten date "4/13/22" in black ink, written over a horizontal line.

Date

A handwritten signature in black ink, appearing to read "Kaitlynn Taylor RN", written over a horizontal line.

Home Manager Signature

A handwritten date "4/13/2022" in black ink, written over a horizontal line.

Date

Copy to Employee
Copy to Employee Personnel File/HR