

# BrightPath LLC

## TRAINING SINGLE DATED SIGNATURE PAGE

**Name:** Shedrick Jarbah

**Date:** 03/18/2025

Today's training covered:

<input type="checkbox"/> IAPP Updates	<input type="checkbox"/> SMA Updates	
<input type="checkbox"/> Behavioral Plan Updates	<input type="checkbox"/> Positive Supports Updates	<input type="checkbox"/> Site Team Meeting
<input type="checkbox"/> Rights Restriction Updates	<input type="checkbox"/> Health and Safety Training	<input type="checkbox"/> MAR Retraining
<input type="checkbox"/>	X SPA update	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other:

The necessary updates are highlighted below, and pertain to the staff training that occurred (if not included here, ensure the accurate documents have been reviewed):

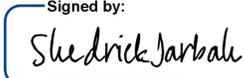
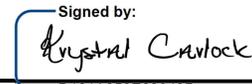
Carissa's SPA was updated to include alone for working hours. She will be allowed up to 6 hours unsupervised while at work.

**Acknowledgement:**

By having my dated signature on this form, I am indicating that I have reviewed and been trained on the documents listed above that have a checkmark in the box. With my dated signature, I am also acknowledging and agreeing to the responsibilities this places on me as the employee working directly with the individual(s) served.

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## SIGNATURE PAGE

PRINTED NAME	SIGNATURES	DATE
Staff Name: Shedrick Jarbah	Staff Signature: Signed by:  D47B530032CD414...	Date: 3/26/2025
Supervisor Name: Krystal Carlock	Supervisor Signature: Signed by:  D161A852E63043D...	Date: 3/26/2025