

EMAN EN Tibbie 9/25/19



DATE: 9/18/19

TRAINING APPROVAL/CONFIRMATION FORM

Please complete this form and provide to your supervisor at least two weeks prior to the start of the training you plan on attending. **NOTE THAT PRE-APPROVAL IS REQUIRED PRIOR TO REGISTERING FOR ALL TRAININGS.** Please keep a copy for your files and provide a copy to your supervisor. PCTI does not need a copy. For external trainings that do not provide certificates of completion, supervisors can use this form to provide confirmation that the training has been completed by their staff.

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|---|---|
| First Name: <u>Irma</u> | Last Name: <u>Sanchez</u> |
| Job Title: <u>Claims Recovery Specialist</u> | Program/Site: <u>171 N. Altadena Dr. Pasadena 91107</u> |
| Divisional Director: <u>Sharon Baker / Julie Lee.</u> | Division: <u>ACLAIM - Admin-Claims Operations</u> |
| Supervisor Name: <u>Tibbie Cheung</u> | |

What is your primary reason for attending? (Select box below)

- Required for license/license renewal
- Required for management/professional development
- Required Culturally Responsive training
- Mandatory training
- Other (Specify) _____

Please list the Desired Training(s)

- Training Name: Part 1: Basic definitions, regulations related to cultural competency, LACDMH strategies to redu...
 Date: 9/18/19 Time: 3:30 pm # of Hours: 37 mins Location: _____
 Pacific Clinics Training Pacific Clinics Webinar
 Non-Pacific Clinics In-Person Training Non-Pacific Clinics Webinar Non-Pacific Clinics self-paced online module
- Training Name: Part 2: Cultural humility, client culture, stigma, elements of cultural competency in service delivery
 Date: 9/18/19 Time: 4:20 pm # of Hours: 30 mins Location: _____
 Pacific Clinics Training Pacific Clinics Webinar
 Non-Pacific Clinics In-Person Training Non-Pacific Clinics Webinar Non-Pacific Clinics self-paced online module
- Training Name: Part 3: Cultural competency scenarios and group discussion
 Date: 9/19/19 Time: 1:30 pm # of Hours: 18.5 mins Location: _____
 Pacific Clinics Training Pacific Clinics Webinar
 Non-Pacific Clinics In-Person Training Non-Pacific Clinics Webinar Non-Pacific Clinics self-paced online module

Please use a new form to list additional trainings.

Supervisor Use Only

Request Approved: 1 2 3 Supervisor Signature: [Signature] Date: 9.8.19
 Supervisor Notes: Please provide email confirmation once is completed.

External Training Completion Confirmation (in lieu of Certificate of Completion)

Training Completed: 1 2 3 Supervisor Signature: [Signature] Date: 9.25.19
 Supervisor Notes: received email staff has completed the training