

Owakahi, Inc.
Training Summary Form

I. Employee: Amiro Said Topic: supervisory meeting Credit Hours: .75

II. Description of Training Content: Review of incident from 3/1, expectations of position - timeliness, checking audit schedule, cleaning list. Updated Chris w/ interactions, unprofessional Training Procedures: conversations - sharing info w/ supervisor

Training Format		Instructional Methods		Demonstrated Competency	
<input type="checkbox"/>	Self Study	<input type="checkbox"/>	Written: _____	<input type="checkbox"/>	Knowledge Testing (Quiz)
<input checked="" type="checkbox"/>	Individualized Training	<input checked="" type="checkbox"/>	Oral Presentation and Dialogue	<input type="checkbox"/>	Observed Skill Assessment
<input type="checkbox"/>	Team Meeting	<input type="checkbox"/>	Guided Observation	<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	Owakahi Inservice	<input type="checkbox"/>	Guided Practice		
<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Other: _____		

IV. Date(s): 3/3/2020 Trainer/Position: DFC
(M/D/Y)
Time(s): 8-8:45a Trainer Signature: [Signature]
(AM or PM)

I understand the information received and my responsibilities for implementation with this company and persons served.
Employee Signature: [Signature]

Training hours need to be recorded by employee on corresponding timecard for reimbursement and training documentation purposes. Employees are encouraged to keep a copy of this verification for their personal records.