

Owakihini, Inc.
Training Summary Form

I. **Employee:** Ibtisam Ibrahim **Topic:** OMBUDSMAN ALERT SUMMER 215 **Credit Hours:** _____

II. **Description of Training Content** Review and instruction on the 2014 Ombudsman Summer Alerts. Topics include the following:
Cover Letter 2018 with MedWatch Safety Alerts; Summer Alert; Heat Stroke Alert; Water Safety Alert; Insect Sting Alert; Metabolic Syndrome Update; and Suicide Prevention Resource List.

III. **Training Procedures**

<u>Training Format</u>	<u>Instructional Methods</u>	<u>Competency Evaluations</u>
<input checked="" type="checkbox"/> Self Study	Written: See above	<input checked="" type="checkbox"/> Knowledge Testing (Quiz)
<input type="checkbox"/> Individualized Training	Video Tape: _____	<input type="checkbox"/> Observed Skill Assessment
<input type="checkbox"/> Supervisory Meeting	Oral Presentation and Dialogue	Other: _____
<input type="checkbox"/> Owakihini Inservice	Other: _____	
<input type="checkbox"/> Other: _____		

IV. **Training Dates and Times**

Date(s): _____ (M/D/Y) Trainer/Position: see above
Time(s): _____ Approval Signature: 
Location(s): _____ Employee 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.