



Training Summary Form

I. **Employee:** Jonathan D Rivers **Topic:** Summer Ombudsman **Credit Hours:** 1.0 hours

II. **Description of Training Content:** Review of Summer Ombudsman Information including Insect Stings, Summer Alert, Water Safety, and Heatstroke.

III. **Training Procedures:**

Training Format

- Self Study
- Individualized Training
- Team Meeting
- Inservice
- Other: _____

Instructional Methods

- Written: _____
- Oral Presentation and Dialogue
- Guided Observation
- Guided Practice
- Other: _____

Demonstrated Competency

- Knowledge Testing (Quiz)
- Observed Skill Assessment
- Other: Star training

IV. **Date(s):** 9/2/2020 **Trainer/Position:** DC
 (M/D/Y)
Time(s): 10:00 AM **Trainer Signature:** Jonathan Rivers
 (AM or PM)

I understand the information received and my responsibilities for implementation with this company and persons served.

Employee Signature: Jonathan Rivers

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.