



Documentation & Implementation of Learning

(Self Study or Trainings)

Name: _____ **Position:** _____

Is this Documentation of Learning for a: *Self Study* or *Training* (Circle one)

Title: _____

Author / Presenter: _____

Length (hours/minutes **and** pages/chapters if book/article): _____

Date self study / training was completed: _____

If Self Study, what type (video, book, article, etc?): _____

Three things I learned from this training that I can use in my work are:

1.

2.

3.

Did training address issues of cultural sensitivity? Yes No **In what way?** _____

What Training Topic(s) were addressed through this training or self study? _____

*** If this is a self study include a photocopy of book cover and table of contents or front and back of video cover. If this was training, please include an outline and/or learning materials from training.*

Supervisor Signature: _____ Date: _____

(Signature indicates that this training/self study has been discussed with Supervisor and is approved as valuable training meeting training topic requirement)