

**Training Documentation and Approval Form**

(Please use ONLY when certificate is not provided)

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Title of Training: \_\_\_\_\_

Name of presenter or author: \_\_\_\_\_

Book     Audio     Video     Workshop     Internet     Other (list) \_\_\_\_\_

Please list number of pages, minutes, or hours of training: \_\_\_\_\_

*(# of hours granted will be hour-for-hour, actual workshop length, or 1 hour per 50 pages.)*

**Report Outline**

(Use back or additional sheets as needed)

What was the training material about?

What new information did you gain?

How will you use it in fostering children?

Number of training credit hours granted: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by LFS staff member: \_\_\_\_\_