

Ohio Advocate Network - CEU Training Verification Form

An OAN Registered Advocate, *once credentialed*, may use this form **to record and verify completion** of continuing education training received through conferences, seminars, in-service training, workshops, webinars, on-line modules, etc. Retain for your records, should an OAN training audit be requested.

ADVOCATE'S NAME:				
GENERAL INFORMATION	TITLE OF TRAINING:			
	SPONSOR OF TRAINING:			
	DATE(S) OF TRAINING:			
	TIME OF TRAINING:	FROM:	TO:	Total Hours:
	TRAINER'S NAME/TITLE:			
	TRAINING LOCATION:			
	Which TAG List Topic Category(ies) does this training fulfill:			
<hr/>				
<p><i>To be SIGNED by Trainer OR Training Sponsor OR Other Authorized Representative:</i></p>				
<hr/> <p><i>Print Name:</i></p>		<hr/> <p><i>Date</i></p>		

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This form may be duplicated