

**IN-SERVICE TRAINING REVIEW FORM**

Please complete this form, sign and submit to your Case Supervisor for any in-service training you participate in outside of the CASA of Sacramento County hosted trainings. This includes any educational activity that supports your work as a CASA volunteer including; conferences, lectures, courses, webinars, books and movies. The maximum hours you can complete on your own is 6 and the rest will need to be completed by our hosted trainings. The questions listed at the end are optional.

Circle One: Conference Webinar Course Book Video Other:\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Title of In-Service Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Completed (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Author/Presenter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hours (Books = 3 hours, all others count actual hours of session): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I acknowledge that I have completed this activity for the amount of time listed in order to achieve the in-service hours required to maintain in good standing with the CASA of Sacramento County program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Advocate Signature Date

***Optional:***

1. What did you learn that is relevant to your work as a CASA?

1. What did you learn that you would like to share with other CASAs? Would you recommend this in-service training to others?