## **Alternative Training Verification**

Instructions: This form should be completed and signed by a foster parent seeking credit for alternative training. Complete one form per foster parent for each book, video, or audio reviewed and return it to your caseworker.

All alternative training topics must be pre-approved by your caseworker, or you may not get credit for the training.

Maximum of 6 alternative training hours per foster parent per year.

FOSTER PARENT INFORMATION	
Name of foster parent	Phone number
	( )
Address	
BOOK, VIDEO, OR AUDIO TAPE INFORM	MATION
Title	Length of book or video
Author/Presenter	Credit Hours
What was the book, video, or audio you reviewed about?	
I what was the book, mace, or addie you reviewed about.	
How does it valete to your vale or a factor remark?	
How does it relate to your role as a foster parent?	

What is one thing you learned as a result of this review?		
What is one thing you could change about the way you foster chil	dren as a result of this review?	
I hereby verify that I reviewed the book, video, or audio and that I completed this form based upon my personal knowledge of the material reviewed.		
Signature	Date	
	<u>l</u>	
FOR AGENCY USE ONLY		
Training Hours Awarded		
Caseworker		
Signature	Date	
Casework Supervisor		
Signature	Date	