



Specialist Recertification Application Confirmation of Ongoing Training and Education

All Specialists shall obtain 10 hours of ongoing training and education every 2 years of certification status, in areas related to certification competencies. Similar areas are also acceptable (i.e. wellness, behavior support, or educational strategies). In-house training is acceptable for ongoing education and training. Attending conferences, special training sessions, teleconferences, or web based learning are all acceptable.

One hour of ongoing training and education is equivalent to 60 minutes of instructional time, exclusive of breaks, lunches, or homework time.

Training 1:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 2:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 3:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 4:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 5:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 6:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 7:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 8:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 9:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 10:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 11:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 12:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 13:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 14:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 15:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 16:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 17:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 18:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 19:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training:

Training 20:

Topic:

Provider/Sponsor:

Hours of Training:

Date(s) of Training: