STAFF TRAINING TRACKER

RISK MANAGEMENT

Please keep this document on file at the school or location where the staff training was performed. At the end of the school year, each policy/subject not covered by the SafeSchools program should be documented on one of these forms.

DATE PERFORMED: _____

SUBJECT/POLICY #: _____ **PRESENTER:** _____

SUBJECT/POLICY #: _____ **PRESENTER:** _____

SUBJECT/POLICY #: _____ **PRESENTER:** _____

SUBJECT/POLICY #: _____ **PRESENTER:** _____

SUBJECT/POLICY #: _____ **PRESENTER:** _____

NAME	NAME

WASHINGTON COUNTY SCHOOL DISTRICT