



ALASKA CENTER FOR RESOURCE FAMILIES

Alternative Training Information Sheet for Resource Families

You may use this sheet to submit any NON-Alaska Center for Resource Families on-site or self-study training hours. This Training Information Sheet will be used to update your training record. *INCOMPLETE Training Information Sheets will be RETURNED for correction before hours will be credited. ACRF WILL NOT CREDIT any training hours submitted that are OVER ONE YEAR OLD.*

To receive credit for training offered outside of ACRF sponsored training, you must:

1. Complete ALL information asked for on this Training Information Sheet.
2. Attach certification of training (such as a certificate, letter from trainer, agenda, signed flyer or sign-in sheet, etc).
3. Submit form and verification to: Alaska Center for Resource Families
815 Second Avenue, Suite 202
Fairbanks, AK 99701
Or FAX to: 907-479-9666

If you have any questions about training, please call 1-800-478-7307 or 479-7307 Fairbanks area

PLEASE PRINT

Provider's License#: _____ Email: _____

Name (s): _____

FIRST

LAST

FIRST

LAST

Address: _____

MAILING ADDRESS

CITY, STATE and ZIP CODE

Home Phone: _____ Work Phone: _____

ALTERNATIVE WAYS TO RECEIVE TRAINING CREDIT

Foster parents can receive training credit for educational opportunities completed outside of ACRF onsite training. For these opportunities to qualify for training hours, the sessions **MUST CONTAIN AN EDUCATIONAL COMPONENT** and **YOU MUST ATTACH DOCUMENTATION** that you completed the training. Acceptable documentation includes a certificate of completion, a copy of a certification card, a letter or note signed by the presenter, or a copy of the sign in sheet. Listed below are some accepted ways to earn training hours. Contact ACRF to determine what will be accepted.

- ✓ Training or In-Service with other foster parents
- ✓ Support Group Meetings with speaker or trainer
- ✓ Local conferences, workshops or seminars
- ✓ University classes related to caring for special needs children
- ✓ One-on-one training session with child therapist
- ✓ Home safety courses (fire and poison prevention)
- ✓ First Aid/CPR Instruction
- ✓ Consultation with medical staff about child's special needs (Does not include routine medical appointments)
- ✓ Training session with placement agencies/OCS/ICWA
- ✓ FASD Diagnostic Team Education Sessions
- ✓ Treatment Team Meetings with Educational Component (Does not include IEP's)
- ✓ Cultural Training Opportunities

Please complete blank form on the back of this page

TRAINING INFORMATION

REQUIRED: *If this section is not completed your form will be returned and credit will not be given.*

Name of LICENSED foster parent: _____

Date of Training: _____

Training Title: _____

Community or City where training was held: _____

Presenter/Speaker: _____

Sponsoring Agency: _____

Number of Hours Completed: _____ Documentation Attached? YES NO
(Documentation is REQUIRED)

ACRF Office Only ___Accepted ___Not Accepted

Tell us how this educational opportunity increased your knowledge about how to care for special needs children

Name of LICENSED foster parent: _____

Date of Training: _____

Training Title: _____

Community or City where training was held: _____

Presenter/Speaker: _____

Sponsoring Agency: _____

Number of Hours Completed: _____ Documentation Attached? YES NO
(Documentation is REQUIRED)

ACRF Office Only ___Accepted ___Not Accepted

Tell us how this educational opportunity increased your knowledge about how to care for special needs children
