



CHILD WELFARE TRAINING ACADEMY- EXTERNAL TRAINING APPROVAL FORM

The purpose of this form is to approve and track your participation in training outside of the agency such as conferences, online training, seminars and workshops. Completion of this form will ensure that CWTA places earned credit in your individual training record. Note that you must complete a form for each individual training event attended.

PERSONAL INFORMATION (PLEASE TYPE/PRINT ALL INFORMATION)

NAME (LAST, FIRST):	ADMINISTRATION/AGENCY:	POSITION TITLE :
IMMEDIATE SUPERVISOR NAME (LAST, FIRST):		TODAY'S DATE:

TYPE OF EXTERNAL TRAINING
(Please check all that apply)

ONLINE

TRAINING COURSE

SEMINAR

CONFERENCE

TITLE OF EXTERNAL TRAINING:	
DATE OF TRAINING:	LENGTH OF TRAINING (IN HOURS):
REASON FOR ATTENDING:	

Scan and email the completed form and the certificate to the aretha.wells@dc.gov.

PLEASE DO NOT WRITE BELOW THIS LINE. TO BE COMPLETED BY CWTA.

CWTA SIGNATURE

DATE

APPROVED

NOT APPROVED

REASON NOT APPROVED:

DATE RECEIVED:

DATE RECORDED IN FACES: