

Organization:	Board Education Reporting Form
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Director Name:

Time Period:

<input type="checkbox"/> I did not attend any training or education during the time period indicated.	
Signature	Date

<input type="checkbox"/> I attest I have attended the training and education listed below.	
Signature	Date

Training / Education Attended	Date	Location	Expenses Incurred (receipts must be attached)	Number of Educ. Hours
			\$	

**Please attach copies of any agendas or programs.*

Internal Meetings	Date	Location	Number of Educ. Hours