



Leadership Development Leaf/Leaves Training Record Report

Please complete a separate training record report for each course for which you are requesting leaf/leaves. Please print and/or write legibly. Non-legible applications and/or training record reports will not be considered.

Course

title: _____

Credit/CEUs (if applicable): _____

Date(s): _____

Number of sessions: _____

Hours: _____

Trainer(s): _____

Major Topics Covered: _____

What specific skills or knowledge have you gained?: _____

How has this training/course affected your work with girls?: _____

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