

**Reflection of Learnings**  
**Application for Continuing Education Units**  
*By an Individual*

Name of Event Safe Sanctuaries Training

Location Online Video Training via MinistrySafe

Date Online Training Completed \_\_\_\_\_

Please use the bottom portion of this form to reflect upon the training in which you have participated and record concisely and clearly your learnings as a result of this training.

This application for CEUs and report on Reflection of Learnings is to be emailed to [awynn@susumc.org](mailto:awynn@susumc.org) in the Conference Connecting Ministries Office.

Upon receipt of this completed form, the Director of Connecting Ministries will issue a certificate of recognition for 0.25 CEUs and return this form to each applicant by email.

**FAILURE TO LIST APPROPRIATE NOTATIONS OF LEARNINGS WILL INVALIDATE THIS APPLICATION AND NO CEUS WILL BE ISSUED.**

By completing this application, I certify that I have been a full-time participant in all the sessions of the online training (Sexual Abuse Awareness Training) through MinistrySafe.

Name of Applicant \_\_\_\_\_

Email Address \_\_\_\_\_

**LEARNINGS from online training:**