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 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: