

FOSTER GRANDPARENT TUTOR TRAINING VIDEO FORM

I certify that I watched the following videos for Orientation and or In-Service Training for the equivalent of a 4 hour training:

Phonemic Awareness: _____

Phonics: _____

Reading Fluency: _____

Vocabulary: _____

Reading Comprehension: _____

Date Training Began _____

Date Completed _____

Name: _____

Signature _____