

PROVIDER'S NAME _____

Name of Caregiver/Helper _____

MN Rules, part 9502.0345, H. requires that the agency maintain records of training completed by providers and caregivers. This information should be maintained by the provider and submitted to the agency on request.

TRAINING LOG

Date	Training Title	Hours	Date	Training Title	Hours

*See Minnesota Rules, part 9502.0385, subparts 2 and 3 for training requirements.