

Certificate of Training Completion

Use this certificate for self-documentation when certificates of completion are unavailable. Remember to update the Professional Standards Training Tracker.

This certificate confirms participation and serves as documentation for the following training:

Training Name: _____

Training Code(s): _____

Training instructed by: _____

Date of Training: _____

Length of Training: _____

Participant(s): _____

South Dakota Child & Adult Nutrition Services

