Foster Adoptive Mission
Resource Parent Training Credit Form

Type of Learning Opportunity: Article or Video or Audio file

Date(s) article/video/audio was read/watched/listened to: _____

Title of Article or link: _____

Your name:_____ Agency/Area Office: _____

Name of Social Worker: _____

Please answer the following:

1. What are your immediate thoughts about the article?

2. How do you feel this article is relevant or useful to parents?

3. Is there anything you feel you may or can do differently after reading this article? If so, please explain/list.

THANK YOU!!!

Please give this to your Foster Care Worker so that you can receive credit for training.