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|  xDHS-SPD_Combo  | **Mail to:** OLQC – AFH Training Credit Committee500 Summer St. NE, E-13, Salem OR 97301-1074**FAX to:** OLQC training committee 503-945-7811**E-mail to:** AFHTraining.spd@state.or.us  |
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| **Provider Request for Adult Foster Home Training Credit** |
| **\*Request must be received 5 p.m. on Wednesday for consideration the following Monday.** |
| **\*Please type or print legibly. Incomplete submissions will not be processed.** |
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| **Type of AFH license** (Check the type of license you have or type of AFH you work in.) |
| [ ]  Addictions and Mental Health | [ ]  Aged and Physically Disabled | [ ]  Developmental Disabilities |
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| Application submitted by: |       | Date: |       |
| Phone: |       | E-mail: |       |
| FAX or mailing address: (If e-mail not provided.): |       |
| Title of training: |       |
| Location: |       |
| Date of training: |       | Start time: |       | End time: |       | Cost: | $ |       |
| Limits on participation (i.e. Smith foster home providers only): | [ ]  | Yes | [ ]  | No |
| Explain limits: |       |
| Name(s) of instructor/author/presenter: (add extra page if multiple) |       |
| Credits requested: |       |  |
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| **Brief description of training content and its applicability to the AFH:** |
|       |
|  |
| **Choose one:** | [ ]  Web | [ ]  Self-study | [ ]  Classroom | [ ]  Conference | [ ]  Video |
| [ ]  Other | Describe: |       |
|  |  |
| **Please provide all of the following: (Demonstration of course content required.)** |
|  |
| [ ]  | Course advertisement, brochure, registration | [ ]   | Course or training outline, curriculum |
|  |
| [ ]  | Course or conference agenda | [ ]   | Training materials-PowerPoint handouts |
|  |
| [ ]  | Web site address if applicable | [ ]  | Course exam materials |
|  |  |
| [ ]  | Literature - Submit the following: Author name, publication date and contact description |
|  |  |
| [ ]  | Video: requires detail of content and publication date |
|  |
| If approved, would you like it posted to the AFH training web site? | [ ]  Yes | [ ]  No |
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