



INDIVIDUAL TRAINING CERTIFICATION

By signing below, I certify I have reviewed and agree to follow OSU's Youth Program and Activity Guidelines, including the **Youth Safety Standards of Behavior** located online at youth.oregonstate.edu/standards.

I understand that failure to abide by these policies may result in disciplinary action, including termination.

Training Facilitator(s): _____

Sponsoring Unit: _____

Program/Activity: _____

Program Date(s): _____

Attendee information:

PRINTED Full Name

E-mail address

Signature

Date of Training/Standards review