

2019 ANNUAL EDUCATION PACKET RETURN FORM

Dear Volunteer: please sign, initial and return this form by December 31, 2019. *Please write legibly.* Keep the enclosed educational materials and policies for your records. This packet will count for **4 hours** of your 2019 continuing education. Feel free to call your Volunteer Manager if you have questions or need help. Thank you for your time!

I have read and understand the educational and recertification materials listed below:

My Initials	EDUCATIONAL MATERIAL AND POLICIES ENCLOSED AND REVIEWED:	FOR OFFICE USE ONLY Educational/In-service Hours
	ALS Overview	1.0
	Hospice Chaplains: Presence and Listening at the End of Life	1.0
	What is Self-Care and Why Is Self-Care Important?	.50
	Moving Forward After the One You Cared for Dies	.50
	The Comfort Of the Ordinary- On Dying as We've Lived	.50
	The Grace of Denial	.50
	<i>I will call my Volunteer Manager if I have questions or comments regarding newsletter educational content.</i>	<small>GRAND TOTAL EDUCATIONAL HOURS</small> 4 HOURS

VOLUNTEER NAME: _____

VOLUNTEER SIGNATURE: _____ **TODAY'S DATE:** _____

For your convenience the articles can be found here:

<https://www.hospiceoflaurenscounty.org/Last%20Chance%20Packet.pdf>.

****Please note that effective January 1, 2017, all volunteers are required to obtain 8 hours of continuing education per year in addition to the 4 that HPCCR gives you for reading the Volunteer Services Quarterly Newsletter. This packet alone will not satisfy your annual requirement****