**CITA/OCLA VIDEO CLE Certification Form 2018**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand that I am required to complete **eight (8) hours** of relevant training in order to ensure that I am in compliance with the training requirements and standard based representation required for state funding under RCW 13.34.100(6).

**By signing this form I certify that I viewed the following trainings in their entirety:**

* Boundaries and Self Care When Representing Children
* Immigration Considerations When Representing Children
* Representing Interests of Preverbal Children
* DDA Considerations When Representing Children I
* DDA Considerations When Representing Children II
* I took 3 Harvard IA tests
* I watched the bike theft video

By signing this form, I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_also certify that I have participated in 2 coaching calls or meetings with my OCLA mentor.

Signed this \_\_\_\_ day of \_\_\_\_\_\_\_, 2018.

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Signature