



Colton-Redlands-Yucaipa Regional Occupational Program
1214 Indiana Ct., Redlands, CA 92374
(909) 793-3115 (phone) / (909) 793-6901 (fax)

STAFF DEVELOPMENT FOLLOW-UP FORM

DIRECTIONS

CRY-ROP Staff Member: Complete Top Section and email to your Manager's.

Manager: Complete Bottom Section and save to Staff Development Reports Folder on the S Drive. Also send signed hard copy to Human Resources.

TO BE COMPLETED BY STAFF DEVELOPMENT PARTICIPANT

Date of Activity: _____ Name: _____

Telephone Number of Participant: _____

Email of Participant: _____

DESCRIPTION OF STAFF DEVELOPMENT ACTIVITY:

BASED ON YOUR ATTENDANCE, NAME ONE THING YOU CAN APPLY TO YOUR JOB:

COMMENTS:

WOULD YOU RECOMMEND THIS ACTIVITY TO OTHERS, IF SO TO WHOM:

DID YOU BRING BACK MATERIALS THAT YOU CAN SHARE WITH OTHERS? Yes _____ No _____

TO BE COMPLETED BY MANAGER

Date Report Received: _____

Notes:

Manager's Signature