

KEEPING KIDS SAFE, INC Foster Parent Book Training

Foster Parent Name: _____

Name of Book: _____

Author(s) of Book: _____

Number of pages: _____ Date(s) of read: _____

Please provide an overview of the material. Give specifics as to how the material may influence your parenting/thinking and what you learned. You may use the back of the page, if needed.

Would you recommend this material to other foster parents? _____ To staff? _____

Signed: _____ Date: _____
(Foster Parent)

Training Hours approved _____ by _____ Date _____
of Hours Staff representative