



Georgia 4-H
Certified Overnight Chaperone Training
Certification Agreement

Leader's Name:

Leader's County:

Trainer's Name:

Date of Training:

Check all that apply:

Prior to training, the leader above met the CAES CES screening requirements with documentation & agreement on file.

The Certified Overnight Chaperone Training included the following components has been completed: Video program including History of Georgia 4-H, Adult Behavior Guidelines, Stages of Youth Development, Discipline Strategies, Accident and Illness Procedures, Working with Policies and Guidelines; Discussion of each section and distribution of the 4-H Overnight Chaperone Handbook



Having reviewed *The 4-H Certified Overnight Chaperone Video*, the accompanying written material, and participated in the training, the above leader has met the criteria for certification as an overnight chaperone and been given an Overnight Chaperone Handbook.

Signature of Certified Overnight Chaperone Trainer

I have completed the Overnight Chaperone Training Program described above and am willing to follow the policies, guidelines and procedures outlined in the training and the handbook. I have been provided with a handbook and been given the opportunity to discuss the information.

Signature of Certified Overnight Chaperone