



**Human Resource Management Affirmation Form**  
*(to be completed, signed, and submitted at certification renewal)*

**Professional Development Provider Instructions:** The provider will affirm by initialing and dating that each substance abuse specific staff has completed all staff training listed below:

<b>Training Topic Areas</b>	<b>Initial and date upon training completion:</b>
Client Rights Ch.2, Section 2 (c) (ii)	
Trauma Assessment & Mgmt Ch. 2, Section 7 (d)	
Cultural Competency Ch. 2, Section 7 (d)	
Rights of Person Served Ch. 2, Section 7 (d)	
Family-Centered Services Ch. 2, Section 7 (d)	
Prevention of Workplace Violence Ch. 2, Section 7 (d)	
Confidentiality Ch. 2, Section 7 (d)	
Professional Conduct & Ethics Ch. 2, Section 7 (d)	
Special Populations Served Specific to Services Provided Ch. 2, Section 7 (d)	
Plan for access to 1 <sup>st</sup> Aid – All Programs Ch. 2, Section 2 (d) (i)	
1 Staff w/ CPR – Res Programs Ch. 2, Section 2 (d) (i)	
Emergency Procedures Ch. 2, Section 2 (d) (ii)	
Volunteers acknowledging P&P review / understanding, if applicable Ch. 2, Section 7 (c)	

**Specific to DUI / MIP Provider Instructions:** The provider will affirm by initialing and dating that the applicable staff have completed the following training:

<b>DUI / MIP Training</b>	<b>Initial and date upon training completion:</b>
Provider of this service demonstrates ability, through education and training, to provide DUI/MIP education, and utilizes one (1) of the three (3) approved curriculum. Name of curriculum used: _____ Ch. 4, Section 10 (a)	

**Personnel Records Provider Instructions:** The provider will affirm by initialing and dating that each substance abuse specific staff have the following applicable information in their personnel record:

<b>Personnel Record Contents</b> Ch. 2 Section 7 (i)	<b>Initial and date affirming items are in personnel records:</b>
Annual Performance Appraisal Ch 2, Section 7 (i)	
Current Professional License Ch 2, Section 7 (i)	
Job Description Ch 2, Section 7 (i)	
Resume or Application Ch 2, Section 7 (i)	
Letters of Reference or Verbally Documented References Ch 2, Section 7 (i)	
<b>The provider will affirm that the following forms are not kept in personnel files, but kept in a separate and locked location:</b>	<b>Initial and date affirming items are in personnel records, but kept in a separate and locked location:</b>
I-9 Forms Ch 2, Section 7 (i)	
DFS, Sex Offender, DCI-State Background Check Affirmation Form Ch. 2, Section 7 (h)	

The provider will affirm that the Main Personnel File, I-9 Forms File, Medical Information File and Background Check File are all kept separately and in locked locations. \_\_\_\_\_ (Initials)

Keep a current copy of this form within each personnel file.

\_\_\_\_\_  
Authorized Signature / Title

\_\_\_\_\_  
Date