

**WV AGED AND DISABLED WAIVER PROGRAM  
REGISTERED NURSE INITIAL & ANNUAL TRAINING VERIFICATION FORM**

**Employee Name:**

**Provider Agency/Personal Options:**

**I. ADW Registered Nurse Initial and Annual Training Requirements.** All ADW Registered Nurses must complete all of the following training before providing services for payment and annually thereafter:

a) Person-Centered Planning: must use training provided by WV BoSS.

<b>Training Topic</b>	<b>Date</b>	<b>Start Time/Stop Time</b>	<b>Total Time</b>	<b>Location of Training</b>	<b>Source</b>	<b>RN Signature</b>	<b>Trainer Signature</b>
Person-Centered Planning					BoSS Curriculum		

\*\*Must maintain professional license training requirements:

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**Time period that license is valid**

**Verification of Training:** By signing this document, the Agency Director/designee verifies the Registered Nurse has completed all required training areas listed above.

*Keep completed scored test with RN's name on it in file to demonstrate competency. For any tests with below average scores, document remediation taken to address this. For any internet training that included post-test, keep certificate of completion in file.*

5.25.17