| LEARNING CONTRACT | | | | | |
|----------------------------|-----------------------------------|--|----------------|--|--|
| NAME: DATE ESTABLISHED: | | | | | |
| KEY RESULT AREA: | | | | | |
| COMPETENCY | LEARNING RESOURCES AND STRATEGIES | EVIDENCE OF ACCOMPLISHMENT OF COMPETENCY | TARGET DATE | | |
| | | | | | |
| | | | | | |
| | | | | | |
| DATE REVIEWED: | | | ' | | |
| NEXT STEPS: | | | | | |
| Employee Signature: | | Date: | | | |
| Supervisor Signature: | | Date: | | | |

LEARNING CONTRACT

NAME: SALLY SAMPLE

DATE ESTABLISHED: 6/6/2022

KEY RESULT AREA: DOCUMENTATION COMPLETION & COMPLIANCE

| COMPETENCY | LEARNING RESOURCES | EVIDENCE OF | TARGET | |
|--|---|--|-------------|--|
| AND STRATEGIES | | ACCOMPLISHMENT OF | DATE | |
| | | COMPETENCY | | |
| Sally will complete all required weekly documentation by the close of business each day. | Sally will complete departmental documentation training on 6/7/2022 at 8:00. Assigned trainer will be MM. | Upon successful completion, MM will sign-off on training document. | 6/7/2022 | |
| Sally will submit all daily | MM will be available each | MM will track documentation | Each | |
| documentation to MM prior | day between 8:00-8:30 for | completion and quality. MM will | Monday | |
| to 4:00 pm. | support. | report to supervisor each | through | |
| | | Monday regarding previous week documentation. | 7/11/22 | |
| Documentation will include | MM will review notes the day | If required, notes will be | End of | |
| all required fields as well as | following submission and | corrected. MM will track notes | business | |
| a note reflecting what and | give feedback via email by | and documentation have been | each Friday | |
| how services were | the end of each day. | successfully completed. | | |
| delivered. This will include | | | | |
| the prompt, response, and | | | | |
| next steps. | | | | |

DATE REVIEWED: 7/11/2022

| NEXT STEPS: | Progress v | will be i | reviewed | 7/11/2022 | to determ | ine if o | ngoing | support |
|-------------|------------|-----------|----------|-----------|-----------|----------|--------|---------|
| is needed. | | | | | | | | |

| Employee Signature: | Date: |
|-----------------------|-------|
| Supervisor Signature: | Date: |