

STANDARDS AND TRAINING FOR CORRECTIONS PROGRAM ANNUAL COURSE ROSTER ATTN: STC FIELD REPRESENTATIVE Sara Dunham

(NOT FOR CORE COURSE USE)
 1. CERTIFICATION NUMBER 5759-081349
 2. COURSE START DATE 9-15-15
 3. COURSE END DATE 9-15-15
 4. LOCATION Pomona, CA
 5. CERTIFIED HOURS 4
 6. DATE CERTIFIED 9/11/15
 7. COURSE TITLE (2 lines of text only) T4 - Violence in Our Schools... What We Can Do*
 8. TRAINING PROVIDER CPPCA
 9. TELEPHONE NUMBER (916) 448-5810 x 1
 10. PLEASE LIST ONLY INSTRUCTORS FOR THIS COURSE PRESENTATION. DO NOT WRITE "VARIOUS"
 11. TOTAL PARTICIPANTS 7

12. NAME (LAST, FIRST, MIDDLE INITIAL) (TYPE OR PRINT LEGIBLY)	13. TRAINEE SIGNATURE	14. COMPLETE NAME OF AGENCY	15. HOURS ATTENDED (TO BE COMPLETED BY AGENCY/PROVIDER REPRESENTATIVE ONLY)	16. EMAIL (optional)* (PLEASE PROVIDE YOUR EMAIL ADDRESS. STC MAY CONTACT YOU REGARDING THIS COURSE.)
1. Pava, Lisa	[Signature]	Oreg. Coast Probation D	4	lisa.tadine@prob.d.cgov.com
2. Punsing, Rebecca	[Signature]	Sierra Co. Probation	4	rpunsing@prob.d.cgov.com
3. Jensen, Angela	[Signature]	Mount Lente Cost County Prob	4	angela.jensen@prob.cccounty.us
4. Jones, ROBERT	[Signature]	CONYAS COSTA COUNTY PROB	4	Robbie@prob.d.cgov.com
5. Arnes, LAW	[Signature]	OC PROBATION	4	lavi.arnes@prob.d.cgov.com
6. Cristelium, Monica	[Signature]	VA County Probation	4	monica.cristelium@prob.vacountys.gov
7. woods, Charla L.	[Signature]	Alameda County Probation	4	woods@acgov.org
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17. I CERTIFY THE ABOVE INFORMATION IS CORRECT

NAME AND TITLE: Michelle Nashiff, Dep. Exec. Dir.

AUTHORIZED SIGNATURE: [Signature]

DATE: 9-15-15

*IF YOU WOULD LIKE TO SUBMIT ADDITIONAL COMMENTS, SUGGESTIONS, OR INPUT REGARDING THIS OR ANY OTHER STC COURSE, GO TO OUR WEBSITE AT AND COMPLETE OUR COURSE FEEDBACK FORM. THIS MAY BE DONE ANONYMOUSLY OR YOU HAVE THE OPTION TO HAVE AN STC REPRESENTATIVE CONTACT YOU.