

Verification and Acknowledgment of Training

I, _____, swear/affirm under oath that on _____, I participated in the following training that addressed topics listed in the ODR Policies and Procedures Manual:

Name of Training: _____

Training Provider: _____

Duration: _____

Topics: _____

The above statements are true and correct to the best of my knowledge. I understand that providing false information to the Office of the State Court Administrator or any court may result in my ineligibility for or removal from the Statewide ODR Roster.

Printed name: _____

Telephone Number: _____

Email: _____

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the ____ day of _____, _____, at _____
(date) (month) (year) (city or other location, and state OR country)

Signature