

Individual Supported by Trainee:		DDS Number			
Email		Phone Number			
Fiscal Intermediary:	🗆 Allied 🔲 Sunset Shore	Preferred Metho	od of Contact:	Phone 🗆	Email 🗌

Trainee Name:	Phone Number		
Trainee Email Address:	Preferred Method of Contact:	Phone 🗆	Email 🗆

Referring Case Manager:		CM Email:
Original Referral Date:		
Current Referral Date:		
Preferred Training Path	Self-Pace	Guided 🗆

TRAINING REQUEST FORM

This form should be used to request Enhanced trainings for EOR or any other PST that has already been referred over to PPL and has already gone through training. This is to be used ONLY for those being referred to us for a refresher on any or all the topics below. Please DO NOT use this for NEW referrals.

Subject/Description	Select Training	Notes/Reason for Referral
Options Counseling Refresher		
Orientation of Being a Good Boss		
Review Self-Direction Options Counseling		
Assessment		
SDSA Refresher		
□ Review of SDSA		
Before You Hire		
Pre-Assessment		

Managing your Employee	
Pre-Assessment	
Effective Communication	
Training Employees	
Employer/Employee Agreement Form	
Employee Feedback	
Performance Evaluations	
Ongoing Training	
Post-Assessment	
Terminating Your Employee	
Pre-Assessment	
🗆 Intro	
Knowing When to Terminate	
Preparing for the Conversation	
Holding the Conversation	
Termination Forms	
Post-Assessment	
Electronic Visit Verification	
Pre-Assessment	
EVV Overview	
What is electronic visit	
Verification?	
□ How does EVV work	
Training information	
Training Resources	
Addition Employee Resources	
Who to contact?	
Post-Assessment	

Post-Assessment	
Peer-to-Peer Network	