ALZHEIMER'S DISEASE AND RELATED DEMENTIAS (ADRD) TRAINING

This certifies that:

has successfully completed the Alzheimer's Disease and Related Dementias (ADRD) training identified below, as applicable under section 400.6045 or 430.5025, Florida Statutes.

Training Date:

Training Hours:

Curriculum Approval Holder:

Training Provider Name:

Curriculum Approval Number:

Training Provider Approval Number:

*Curriculum Expiration Date:**

Training Provider Signature:

Topics Covered:

**The curriculum approval expiration date does not represent an expiration date for the employee's completed training.*