

GROUP TRAINING CERTIFICATION

By signing below, I certify I have reviewed and agree to follow OSU's Youth Program and Activity Guidelines, including the **Youth Safety Standards of Behavior** located online at <u>youth.oregonstate.edu/standards</u>.

I understand that failure to abide by these policies may result in discplinary action, including termination.

Training Facilitator(s):		Sponsoring Unit:	Sponsoring Unit:	
Program/Activity:		Program Date(s):		
PRINTED Full Name	E-mail address	Signature	Date	