



**LEGACY
CORPS**

For Veterans and Military Families

Legacy Corps Training Agenda

Topic (s): _____

Date: _____ **Time** _____ (_____ hrs)

Location: _____

Trainer(s): (this may be an actual person or a book title, website, article name, etc.)

Agenda Items (attach training agenda or fill in below)

What are the three main topics of this training?

A.

B.

C.

How does this training relate to your Legacy Corps service and/or life?

A.

B.

Legacy Corps Training Sign-In Sheet

	Name (Printed)	Signature	Hours
1			

*PLEASE MAKE SURE TO ADD THESE TRAINING HOURS TO YOUR MONTHLY TRAINING SHEET
(IN THE TRAINING SECTION)*

2019-2020/Member Forms/ExtraTrainingSignInAgenda

