Appendix 55 ▪ Supervising Care Manager Exemption Training and Development Plan

Goals/Objectives:
Plan for Meeting Goals/Objectives:
List of Training/Courses with Times for Completion:
Plan for Monitoring Exempted Orientee:
Additional Requirements for Job Performance:

Orientee Name/Title:	
Orientee Signature:	
Manager Name/Title:	
Manager/Administrator Signature:	
Date Exempted Orientee Completed Checklist:	