

Sex Offender Treatment Provider Credentialing P.O. Box 47877 Olympia, WA 98504-7877 360-236-4700

## Request for Professional Training and References

## Professional Training Obtained within the last three years (only applies to full certification applicants)

List 50 hours of training (courses, seminars, formal conferences, etc.) directly related to the treatment and evaluation of sex offenders or victims of abuse. Copies of program or course certificates are acceptable. Please review **WAC 246-930-070** for the training requirement.

Seminar Name	Date	Location	Sponsor	Hours
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## Source of Verification (only applies to full certification applicants)

List a professional reference(s) that can verify your experience requirement. Please review <u>WAC 246-930-040</u> for the certification experience requirement.

Name	Address	Telephone