

# Project GO Trainer Report

Trainer Name \_\_\_\_\_


Month/Year \_\_\_\_\_

## TRAINING REPORT

Date	Location	Type of Training	Notes:	# of Participants	Total Miles	Training Hours	TOTAL

## MILEAGE REPORT

Date	Start Location	End Location	Total Miles	TOTAL

<p><b>Training Type Key</b>            EC = Early Childhood            PE = Parent Education            LC = Leader Certification</p> <p><b>Reimbursement Chart</b>            Mileage = \$.50/mile            Services = \$25/training hour</p>	
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<b>INVOICE TOTAL</b>	
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Reviewed By: \_\_\_\_\_

Date: \_\_\_\_\_