

THE CLEVELAND COUNTY BOARD OF COMMISSIONERS

COMMENDS

NAME: _____

FOR COMPLETING THE CLEVELAND COUNTY BOARDS AND COMMITTEES TRAINING COURSE

ON THIS DATE: _____

BY SIGNING BELOW, I ATTEST THAT I VIEWED THIS TRAINING IN ITS ENTIRETY. I ALSO UNDERSTAND THAT EACH BOARD IS DIFFERENT AND THAT THIS TRAINING VIDEO DOES NOT COVER ALL OF THE NUANCES OF EACH BOARD. KNOWING THAT, THE BOARD I SERVE ON MAY REQUIRE FURTHER TRAINING AND/OR EDUCATION.



SIGNATURE: _____

DATE: _____

CLERK TO THE BOARD: _____

DATE: _____