

CERTIFICATE OF COMPLETION

Course Title: *Child Protection Training*

Training Course
Approval Number: YC06-0001

NAME OF RECIPIENT

Date of Completion: _____
Certificate valid for 2 years

Score: _____

COURSE FACILITATOR: _____

Signature

_____ Date

_____ Church or Organization

_____ Position

This certificate is to be kept on file at the Camp or Conference Center you are attending for the duration of your stay.