**Training Report Form**

Colorado Grand Assembly, IORG

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Assembly: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No. \_\_\_\_\_\_\_

*or if mixed group, list Assembly below for each participant*

Name and Qualifications of Presenter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Module Title or other subject: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |  **Name (Please Print)**  |  **ASSEMBLY** |  **YOUTH** |  **ADULT** |
| **1** |   |  |   |   |
| **2** |   |  |   |   |
| **3** |   |  |   |   |
| **4** |   |  |   |   |
| **5** |   |  |   |   |
| **6** |   |  |   |   |
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| **18** |   |  |   |   |
| **19** |   |  |   |   |
| **20** |   |  |   |   |

Please forward completed copy to Supreme Officer

Total # trained: Youth \_\_\_\_ Adults \_\_\_\_