



Magneon Homes, Inc.

**Course Learning and In-Service Training**

Statement of completion for:

**CA 1-Hour Sexual Harassment Non-Supervisors Training**

I, \_\_\_\_\_ (print participant name) certify that I have completed the identified training.

\_\_\_\_\_ [Participant Signature]      Date: \_\_\_\_\_

\_\_\_\_\_ [Supervisor Signature]      Date: \_\_\_\_\_