

## Arkansas Workforce Development Board (AWDB) Orientation and Training

DATE COMPLETED: \_\_\_\_\_

Member Orientation with Board Staff  Self-Paced

Other  \_\_\_\_\_

### Acknowledgement of Training

I acknowledge that I have completed the following topics:

- ✓ Overview of Workforce Innovation and Opportunity Act of 2014
- ✓ Purpose of the AWDB
  - Vision and Mission
  - Roles and Responsibilities of the AWDB
    - (A.C.A. §15-4-3706)
- ✓ AWDB By-Laws
  - Conflict of Interest *(Note: Sign the Conflict of Interest form and submit to appropriate Board staff)*
- ✓ Freedom of Information Act
- ✓ Sunshine Law

\_\_\_\_\_  
AWDB Member Name (PRINT)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Board Director Name (PRINT)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date