

LexisNexis® Training and Evaluation Record

Name:		SRA ID/Roll number:	
Webinar/Training Session Title:		Date completed:	

Key Competencies covered (select from the drop down lists)	What did you learn from this, what are your key takeaways?	Reflections & Evaluations
		How will this training support your practice?
		Are there any gaps that need to be addressed?
		How will you follow-up the training?