

Appendix 41e ■ Nurse Care Manager/ Social Work Care Manager Exemption Training and Development Plan

Goals/Objectives/Timeline for Completion:	
Plan for Meeting Goals/Objectives:	
List Training/Courses with Times for Completion:	
Plan for Monitoring Exempted Orientee:	
Additional Requirements for Job Performance:	
Orientee Signature:	
Supervisor Signature:	
Date Exempted Orientee Completed Checklist:	