

## LA Care Cultural & Linguistic Provider & Staff Training & Resource Distribution

## Confirmation of Training & Receipt/Familiarity with LA Care PPG Interpreting Quick Guide / Practitioner Interpreting Quick Guide and/or Provider Training Flyer

Training/Distribution Due on or before June 15, 2016 to AnnualCompliance@regalmed.com

By my signature below, I hereby acknowledge having received the LA Care Interpreting Quick Guide(s) and Provider Training Flyer, and to understand and be familiar with its content.

Staff Member Name	Department / Group Name	Signature	Date