Leadership Capacity Building Development

Certificate Tracking Form

Employee Name: _____ Certificate Start Date: _____

Agency/Department: _____ Certificate Completion: _____

Completed	Employee Initial	Course	Link
		Building High Performing Teams *Formerly Shaping Effective and Engaged Teams*	Enroll
		Crucial Conversations	Enroll
		Dimensions of Leadership	Enroll
		Foundations of Public Sector Budgeting *Formerly Financial Budgeting*	Enroll
		Leading with Integrity *Formerly Ethics of Leadership & Influence*	Enroll
		Managing Effective Meetings	Enroll
		Performance Evaluation	Enroll
		Supervision Basics *Formerly Fundamentals of Supervision*	Enroll
		The Servant Leader	Enroll
		Vacancy to Hire *Formerly Interview to Hire*	Enroll

_____ _____

Employee Signature Supervisor Signature

_____ _____

Learning Admin Signature (*view learning admin list*) Performance & Development Signature

IOWA | Department of Administrative Services

In order to receive credit for this certificate, the start date must be within five years of the completion date. Once all courses are complete, email the signed form to Performance & Development Solutions at pds@das.iowa.gov.

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