

Foundations in Community Disability Studies

RECORD OF COMPLETION

Learner _____

Tutor _____

Registration Date _____

Module	Test	Attitude and Application	
1. The Evolving Field of Community Rehabilitation	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	
2. Legislation and Human Rights Protection	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> Learner has maintained attitudes and applications from Module 1.
3. Values and Attitudes	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–2.
4. Roles and Responsibilities	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–3.
5. Definitions and Characteristics of Several Common Disabilities	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–4.
6. Safety Issues	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–5.
7. Ergonomics for Safe Lifting and Transferring	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> successful _____ date _____ tutor's initials _____	<input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–6.

8. Adaptive Equipment	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–7. tutor's initials _____
9. Universal Precautions and Infection Control	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–8. tutor's initials _____
10. Personal Hygiene Support	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–9. tutor's initials _____
11. Mealtimes and Nutrition	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–10. tutor's initials _____
12. Promoting Wellness	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–11. tutor's initials _____
13. Facilitating Growth and Skill Development	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–12 tutor's initials _____
14. Interpersonal Communication	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–13. tutor's initials _____
15. Professional Communication Skills	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–14. tutor's initials _____
16. Personal and Professional Competence	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date <input type="checkbox"/> Learner has maintained attitudes and applications from Modules 1–15 tutor's initials _____
17. First Aid and CPR	<input type="checkbox"/> successful _____ date tutor's initials _____	<input type="checkbox"/> successful _____ date tutor's initials _____

18. Medication Administration	<input type="checkbox"/> successful _____ date _____	<input type="checkbox"/> successful _____ date _____
	tutor's initials _____	tutor's initials _____

Learner's signature _____

Tutor's signature _____

Date completed _____