



Attendee Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

CU/Org Name: \_\_\_\_\_

Title of Training Event: \_\_\_\_\_

## Professional Development Grant IMPACT Report Form

How did this grant impact **YOUR** Goals, **YOUR** Growth, and **YOUR** Foundation?

(Please explain in detail below. All grants require this form to be completely filled out to receive expense reimbursement. A separate form is required for each individual that attended the training.)

**Share at least three key lessons learned from this training/education:**

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**Personal Growth & Professional Development - Describe how you will apply what you learned during this opportunity to your role in the credit union and use it for personal and professional growth?**

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**Implementation of New Ideas or Processes - Share an example of how will you implement your findings and disseminate the information in your credit union?**

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***Please summarize how this grant made the most impact for your credit union:***

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**CEO Signature is required on this form:** \_\_\_\_\_

***Please check here if permission is granted for the Foundation to use this feedback in form of quotes.***