

MEBCI 2.0 MODULE:

TRAINER(S):

KybeleIncorporated

...for safe childbirth worldwide

TRAINING DATE: TRAINING LOCATION:

TRAINING SEGMENT: (e.g., day 1 of 3-day training)

TRAINER NOTE: Print for daily participant sign-in. Scan all completed sign-in sheets and send to info.kybele@gmail.com along with an electronic version of the roster tab c

Institution or Hospital	Title	Name	Position	Ward	Phone	Email

ompleted by the trainer post-training.

Gender	Signature
