

## Record of ES Observation Visit:

When completed, fax to 530-295-3583 (Attn: training) or mail to IEM Training,  
4535 Missouri Flat Road, Ste. A, Placerville, CA 95667

Directions: As a part of the initial ES Training, it is the responsibility of each newly hired ES to call their Area Facilitator to coordinate a time to observe an ES visit with their AF as soon as it can be arranged.

ES Code: \_\_\_\_\_ ES Name : \_\_\_\_\_ (Please print)

Date of Visit: \_\_\_\_\_ Length of Stay: \_\_\_\_\_

Name of Family Visited: \_\_\_\_\_

Please mark type of visit:

\_\_\_\_\_ Initial Enrollment

\_\_\_\_\_ AESS w/o Learning Record

\_\_\_\_\_ Learning Record

\_\_\_\_\_ New Transfer

\_\_\_\_\_ Other (Please Explain)

How did this observation experience assist you with your ES position?

Your Additional Comments (helps you wish to remember, etc):

Please save a copy of this for your own professional growth files, and mail or fax a copy to the training department to certify completion of this job requirement.

\_\_\_\_\_  
Signature ES

\_\_\_\_\_  
Signature Area Facilitator