Family Development Associate (FDA) Credential Portfolio Learning Reflection Form

Name: _____ Indicator: _____

Learning Context (setting):_____

_____

A **description** of how I demonstrated skills related to the indicator and my **reflection** on this experience: (Please include what you learned, did well, and what you may do differently as a result of the experience.)

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_____Utilize additional "Continuation Sheet" as necessary.

Skill(s) that were:

□ Practiced □ Facilitated □ Utilized
□ Taught □ Promoted □ Demonstrated

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