

2015

Attestation of Completion of NYESS Mandated Training

Indicate the course(s) you have taken:

- Cyber Security Information and Security Awareness
- OMH HIPAA Supplement
- Cornerstones of Confidentiality

Employee Section

I attest that I have completed the above checked courses that are required to access the New York Employment Services System (NYESS)

Please **PRINT** clearly:

First Name: _____ Last Name: _____

Email: _____

Signature: _____ Date: _____

- Please send me a copy of the hardcopy materials for the above checked courses.

I hereby confirm that the individual named above has taken the required NYESS trainings, and was provided with the training materials related to the above checked courses.

Facilitator: _____

Signature: _____ Date: _____