WORKSITE - TRAINING CERTIFICATION REPORT

DATE	PRE-APPROACH LEADS	WALK-INS	DECISION MAKERS SEEN	APPTS SET	TOTAL PRESENTATIONS	PRESENTATIONS COMPLETED - NO ASSISTANCE	ENROLLMENTS				PRINT FIELD TRAINER'S NAME
							# ELIGIBLE EMPLOYEES	# OF EMPLOYEES SEEN	# OF SALES	AP $ WRITTEN	
TOTALS											

TOT. # OF PRESENTATIONS: TOTAL CASES CLOSED: TOTAL ENROLLMENTS COMPLETED:

AGENT'S STATEMENT

1. IS WORKING WITH LIBERTY NATIONAL YOUR FIRST POSITION IN SALES? YES NO
2. DO YOU FEEL YOU HAVE BEEN EFFECTIVELY FIELD TRAINED? YES NO APPS & UNDERWRITING? YES NO QUALITY & RETENTION? YES NO COMPENSATION? YES NO ACTIVITY GENERATION YES NO PRESENTATION? YES NO OBJECTIONS AND REBUTTALS? YES NO

   If no, please explain:

3. HOW MANY DAYS WERE YOU IN THE FIELD TRAINING WITH A FIELD TRAINER? _____ 4. CAN YOU EXPLAIN THE 3 PERIODS OF WORKSITE? YES NO
5. CAN YOU EXPLAIN THE CONCEPT OF SECTION 125? YES NO 6. HOW MANY TIMES DID YOU COMPLETE THE REQUIRED FORMS PACKET? _____
7. HOW MANY TIMES DID YOU CROSS-PRESENT WITH YOUR MANAGER, BEFORE GOING IN THE FIELD SOLO?
8. HOW WOULD YOU JUDGE LIBERTY'S:

SALES INCENTIVES: _____

LEADERSHIP OPPORTUNITY: _____

CLASSROOM TRAINING: _____

FIELD TRAINING: _____

ALL DATA HAS BEEN VERIFIED AND THE AGENT HAS SUCCESSFULLY COMPLETED THE PRESENTATION ROLE PLAY.

AO NAME: _____	AD NAME: _____	AGT NAME: _____
SIGNATURE: _____	SIGNATURE: _____	SIGNATURE: _____
DATE:	DATE:	DATE: AGT#

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