Certificate of Completion of Leadership Training

I certify to the Secretary of the Board of Trustees:

1. I was elected or appointed as a voting trustee of the Board of Trustees of John Wood Community College District No. 539 in the year <u>April 28, 2021</u>.

2. I have completed a minimum of four hours of professional development leadership training, as applicable, during the (check each that applies):

[**X**] **First** [] Third [] Fifth

year after my election or appointment.

3. This certificate is being submitted pursuant to Section 3-8.5 of the Illinois Public Community College Act (110 ILCS 805/3-8.5) (Public Act 99-692).

rinted Name: Don Hess

Certificate of Completion of Leadership Training

I certify to the Secretary of the Board of Trustees:

1. I was elected or appointed as a voting trustee of the Board of Trustees of John Wood Community College District No. 539 in the year <u>April 2017.</u>

2. I have completed a minimum of four hours of professional development leadership training, as applicable, during the (check each that applies):

[] First [**X**] **Third** [] Fifth

year after my election or appointment.

3. This certificate is being submitted pursuant to Section 3-8.5 of the Illinois Public Community College Act (110 ILCS 805/3-8.5) (Public Act 99-692).

Printed Name: Robert Rhea

Certificate of Completion of Leadership Training

I certify to the Secretary of the Board of Trustees:

1. I was elected or appointed as a voting trustee of the Board of Trustees of John Wood Community College District No. 539 in the year <u>April 25, 2017</u>.

2. I have completed a minimum of four hours of professional development leadership training, as applicable, during the (check each that applies):

[] First [] Third [**X**] **Fifth**

year after my election or appointment.

3. This certificate is being submitted pursuant to Section 3-8.5 of the Illinois Public Community College Act (110 ILCS 805/3-8.5) (Public Act 99-692).

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Printed Name: Larry Fischer

Certificate of Completion of Leadership Training

I certify to the Secretary of the Board of Trustees:

1. I was elected or appointed as a voting trustee of the Board of Trustees of John Wood Community College District No. 539 in the year <u>April 24, 2019.</u>

2. I have completed a minimum of four hours of professional development leadership training, as applicable, during the (check each that applies):

[] First [**X**] **Third** [] Fifth

year after my election or appointment.

3. This certificate is being submitted pursuant to Section 3-8.5 of the Illinois Public Community College Act (110 ILCS 805/3-8.5) (Public Act 99-692).

Printed Name: Dr. Randy Greenwell

Certificate of Completion of Leadership Training

I certify to the Secretary of the Board of Trustees:

1. I was elected or appointed as a voting trustee of the Board of Trustees of John Wood Community College District No. 539 in the year <u>April 25, 2017</u>.

2. I have completed a minimum of four hours of professional development leadership training, as applicable, during the (check each that applies):

[] First [] Third [**X**] **Fifth**

year after my election or appointment.

3. This certificate is being submitted pursuant to Section 3-8.5 of the Illinois Public Community College Act (110 ILCS 805/3-8.5) (Public Act 99-692).

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Printed Name: Diane Ary

Certificate of Completion of Leadership Training

I certify to the Secretary of the Board of Trustees:

1. I was elected or appointed as a voting trustee of the Board of Trustees of John Wood Community College District No. 539 in the year <u>April 28, 2021.</u>

2. I have completed a minimum of four hours of professional development leadership training, as applicable, during the (check each that applies):

[X] First [] Third [] Fifth

year after my election or appointment.

3. This certificate is being submitted pursuant to Section 3-8.5 of the Illinois Public Community College Act (110 ILCS 805/3-8.5) (Public Act 99-692).

Date of Certificate: November 17, 2021

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Printed Name: Paula Hawley

Certificate of Completion of Leadership Training

I certify to the Secretary of the Board of Trustees:

1. I was elected or appointed as a voting trustee of the Board of Trustees of John Wood Community College District No. 539 in the year <u>April 24, 2019.</u>

2. I have completed a minimum of four hours of professional development leadership training, as applicable, during the (check each that applies):

[] First [**X**] **Third** [] Fifth

year after my election or appointment.

3. This certificate is being submitted pursuant to Section 3-8.5 of the Illinois Public Community College Act (110 ILCS 805/3-8.5) (Public Act 99-692).

Printed Name: Andy Sprague