



Protocol Training Attestation Form

By my dated signature below, I verify that I have completed the SISTER Protocol Training via one of the following mechanisms (select one):

- ☐ I have received protocol training at the SISTER Investigator Meeting on 1/18/2024 & successfully completed the quiz
- ☐ I have reviewed the SISTER Protocol Training Module & successfully completed the quiz

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

After completion, upload this document to WebDCU™