

## Appendix L

### Certificate of Completion

Make copies of the certificate on the following page, fill them out, and hand them to participants who have completed the curriculum.

*(Name of Institution)*

*Certificate of Completion*

*This hereby certifies that*

*[Name]*

*has successfully completed the class requirements for the*

*Impact of Crime on Victims Program*

*on*

*[Date]*

*[signature line]*

*Warden/Superintendent/Supervisor*

*[signature line]*

*Facilitator*