

CHILD & FAMILY DEVELOPMENT PROGRAMS

Community Action Team, Inc.

Complete the following form and submit to your supervision with the proper documentation, i.e. agenda and registration form. Complete Form 1-86, Per Diem request as needed.

Individual Training Request Form to be completed by staff member:

Name: _____ Position: _____

Training Requested (note if webinar or web-based) : _____

Location of Training: _____ Number of training hours: _____

If web-based, I will need to schedule center time: Yes No If yes, please indicate proposed time and equipment needed: _____

Sponsor/Presenter or websites/webinars that will be utilized: _____

Knowledge/skills I will increase or want to learn : _____

The following practices will improve as a result of this training and I can be evaluated by what I learn by: _____

Dates of Training: _____ Registration Deadline: _____

	Information	Cost	Support Document	Office Use
Registration	Attach to request			
Lodging Needed <input type="checkbox"/> Yes <input type="checkbox"/> No	Hotel Name:			
Meals Included <input type="checkbox"/> Yes <input type="checkbox"/> No	Per Diem Attached			
Mileage/Airfare	Estimates			
Other (Shuttle/Taxi)	Estimates			

I agree to bring back and share with the rest of the staff information from the training. In consideration of receiving the training advance, I voluntarily authorize Community Action Team, Inc. to withhold from my pay check the advance amount and registration amount if I do not attend. This voluntary deduction will be made at the pay period following the conclusion of the training.

ED STAFF ONLY: I also understand that webinar/web-based learning is limited to 5 hours of training per year for the required 24 hours of on-going teacher training.

Signature of staff member _____ Date _____

Submitted to _____ by _____ on _____
 Print supervisor name Staff member name Date

Training approval form to be completed by supervisor:

Supporting documents included and training approved: Yes No Date request received: _____

Signature: _____

Date supervisor returned form to staff member with decision: _____

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Addendum

In response to changing circumstance, the program recognizes the need for flexibility and modifications to better support staff. Until such a time as determined by the program, the following addendum to professional development will be used.

Content:

- Staff will continue to access training that is meaningful and relevant to program practices and service.
- Priority will be given to training opportunities related to relevant job duties and responsibilities.
- Staff will work with supervisors in locating trainings that support their individual professional development and trainings listed on their PDP.
- To the extent possible, professional development opportunities will be content rich and at the level appropriate to the staff person's needs.

Format:

- Virtual trainings that are in the format of an online course or continuing education unit will continue to be counted as approved format for professional development
 - Trainings that have a cost need to have a completed 1-105a submitted to Center Manager prior to registration
- Webinars may exceed the previous limit of 5 hours. Webinars should:
 - To the extent possible meet the content requirements
 - Have a completed form 1-105a noting what the focus of the webinar is, what the staff person hopes to gain, and how this is related to practice or professional development
 - After the webinar Center Managers may choose to debrief verbally or ask the staff person to submit something in writing indicating at least one new idea, or skill, how this will impact practice, and what the next steps are for implementing
 - Staff will complete a written narrative that answers the following:
 - Identify three key points from the webinar
 - How will you implement the strategies you learned in your work?
 - What do you expect to see that is evidence of implementation, i.e. what will happen differently?

Verification of completed training should be sent to admin in a timely fashion. All trainings need to be submitted to Admin with a completed CP6, certificate of completion if provided, and the written narrative (page 2) within 30 days of the webinar/training.

Please answer the following questions to support the impact of the training or webinar you have completed. Submit this form to Admin with a completed CP6, certificate of completion if provided.

Name of staff: _____ Date: _____

Title of webinar/training:

1. Identify 3 key points from the webinar/training:
2. How will you implement the strategies you learned into your work?
3. What do you expect to see that is evidence of implementation, i.e. what will happen differently?