

RCCDC Training Information Form

Date of Training: _____

Name of Training: _____

Trainer Name and Pathways #: _____

CCHC Trainer #: _____

Does this training qualify for Chapter XXI (blue certificates)? Yes No

Training Topic: _____

Head Start Content Areas: _____

CDA Content Areas: _____

of Training Hours: Trainer _____

Signature: _____

Employee Signature (if one on one training given): _____

CDA SUBJECT AREAS
1. Planning a safe and healthy learning environment
2. Advancing children's physical and intellectual development
3. Supporting children's social and emotional development
4. Building productive relationships with families
5. Managing an effective program
6. Maintaining a commitment to professionalism
7. Observing and recording children's behavior
8. Understanding principles of child development and learning

HEAD START CONTENT AREAS
Education
Health
Nutrition
Safe Environments
Transportation
Disabilities
Mental Health
Family and Community Partnerships
Program Design and Management
ERSEA
Fiscal Management