



Washington Association for the Education of Young Children

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STARS Available Training Form

STARS approved Trainers/Organizations may use this form to report available trainings. This inform will appear on the STARS Registry. A Training Completion Report MUST be submitted upon completion of this training.

STAFF USE ED _____

ID # _____ Initials _____

SECTION I. STARS APPROVED TRAINER OR TRAINING ORGANIZATION

Trainer OR Organization _____

Trainer/Organization STARS ID _____ Contact Phone Number _____ Ext _____

SECTION II. LOGISTICS

Training Title _____

Start Date _____ End Date _____ Time _____

Training Location _____

Training Address _____

City _____ State _____ Zip Code _____ County _____

Registration Phone Number _____ Ext _____

Cost of Training \$ _____ Varies _____ No Cost _____ Total College Quarter Credits _____ Total Hours _____

Other Information

SECTION III. TYPE OF TRAINING *Please select the appropriate audience OR indicate the # of hours for each area(s).*

Focus Infant Toddler Preschool School-Age Youth Special Needs Adult All

Type Classroom Setting Self-Paced/Correspondence Online Hybrid (in class & self-paced)

20-Hour Basic Training

- Building Blocks for Family Child Care
- Child Care Center Staff/Mixed Group
- Family Child Care Providers
- School-Age Program Staff

Continuing Education Training

- | | |
|--|--------------------------------|
| ___ Administration | ___ Family Systems |
| ___ Child Growth, Development & Learning | ___ Environmental Design |
| ___ Child Guidance | ___ Health, Safety & Nutrition |
| ___ Communication | ___ Observation & Assessment |
| ___ Cultural & Individual Diversity | ___ Professionalism |
| ___ Curriculum Development | |

SECTION IV. LANGUAGE IN WHICH TRAINING IS OFFERED

American Sign Language Chinese English Japanese Korean Russian

Spanish Tagalog Vietnamese Other _____

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