





Early Care & Education Training Institute, Inc.

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Dear TPCD Candidate:

Thank you for your application to the Training Program in Child Development. To complete the enrollment process, please complete the following information and fax to 203-426-5395

PLEASE Print Legibly:

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email address (must have): \_\_\_\_\_

CCAC Registry Number (https://www.ccacregistry.org/): \_\_\_\_\_

Is English your first language? Yes [ ] No [ ]

If No, what language is your primary? \_\_\_\_\_ Secondary language? \_\_\_\_\_

Are you a high school graduate? Yes [ ] No [ ]

If Yes, year of graduation \_\_\_\_\_ and school attended \_\_\_\_\_

If No, what grade level did you complete \_\_\_\_\_

Do you have any college degrees or certifications or have taken college credit courses? Yes [ ] No [ ]

If Yes, please list what you have completed and where. (AND, provide us with a student transcript from the college(s) you took coursework from.)

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

How long have you been employed in the early childhood and education field?

[ ] 1 year or more. How many years \_\_\_\_\_ [ ] less than 1 year [ ] Volunteer

How long have you been with your current employer?

[ ] 1 year or more. How many years \_\_\_\_\_ [ ] less than 1 year

Place of Employment: [ ] Child Care Center [ ] Family Child Care Home [ ] Family/Friend/Neighbor

Center Name: \_\_\_\_\_

Director's Name \_\_\_\_\_

Is the Child Care Center: (please check all that apply)

[ ] Licensed or [ ] Legally exempt from licensing

[ ] DSS funded

[ ] CCAC AFP

[ ] NAEYC Accredited

[ ] Head Start

Do you work in a School Readiness classroom: [ ] Yes [ ] No

What age group do you care for? [ ] Preschool or Infants: [ ] Young [ ] Mobile [ ] Toddlers

What is your position? \_\_\_\_\_

Please tell us why you want to complete the TPCD training, gain your CDA and earn college credits, as well as what your future goals in the field of early childhood are ?

\_\_\_\_\_
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