



Institute of Excellence in Early Care and Education



Name: _____ Date: _____

I am registering for and committed to attending *all five components* of Trainer Approval Series #_____.
(Refer to the table below)

Trainer Approval Series 2008	Times	Series 1	Series 2	Series 3 Saturdays
Trainer Orientation (Registry Trainers Exempt)	9:00-10:00		04/02/08 PGA	09/06/08 Boca Raton
Score w/the Core and Training Standards	9:00-12:00		04/16/08 PGA	09/20/08 Boca Raton
*Outcomes Driven Training I	8:30-3:30		04/30/08 PGA	10/04/08 Boca Raton
*Outcomes Driven Training II	8:30-3:30		05/14/08 PGA	10/18/08 Boca Raton
Trainer IT	9:00-11:00		05/28/08 Lake Worth	11/08/08 Lake Worth

Participant Profile:

- 1) How did you hear about the Trainer Approval Series? _____
- 2) How did you hear about the Palm Beach County ECE Registry? _____
- 3) Are you a Palm Beach County Registry approved trainer? Circle one: Yes No
- 4) How long have you been a trainer? _____
- 5) How often do you train? _____
- 6) Have you attended other sessions about the principles of adult learning? If so, please list them. _____
- 7) In which areas do you believe you are most qualified to train?

- 8) What do you find most challenging about training adults?

- 9) What do you expect to learn from *Outcomes Driven Training*?

- 10) Please rate yourself as a trainer, 1 to 5, 5 being *excellent* _____

*** Outcomes Driven Training I and II may be taken alone for professional development. To meet the Palm Beach County Registry trainer approval requirements, all five components must be completed.**