

WV STARS Registered Training Sign-In Sheet

<i>Office Use Only</i>
Date Received:
Date Entered:

Title of Training:			
Presenter(s) Name:			
Sponsoring Trainer (if applicable):			
Training Registration Number:		Trainer's Registry ID#:	
Training Date:		County:	
Training Time:		Number of Attendees:	
Core Knowledge Content Area(s) and Clock Hours			
<i>Child Growth and Development:</i> _____ <i>Hours</i>		<i>Child Observation & Assessment:</i> _____ <i>Hours</i>	
<i>Health, Safety, and Nutrition:</i> _____ <i>Hours</i>		<i>Family and Community:</i> _____ <i>Hours</i>	
<i>Positive Interactions & Relationships:</i> _____ <i>Hours</i>		<i>Program Management:</i> _____ <i>Hours</i>	
<i>Curriculum:</i> _____ <i>Hours</i>		<i>Professionalism:</i> _____ <i>Hours</i>	
Place barcode sticker in this column. If you do not have a barcode, print your name and WV STARS Registry Identification Number.	In which county do you work?	In what type of program do you work? (center, Head Start, etc.)	Your e-mail address

Please note as of July 1, 2008 all participants must sign in using barcode sticker or by printing both name and Registry Identification Number for training to be tracked by WV STARS.

Mail completed document to **WV STARS 611 7th Ave, Suite 322 Huntington, WV 25701** within 30 days of the training.

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