

Entity Approved Instructor Profile Sheet

WV STARS

West Virginia State Training and Registry System



Office Use Only

Date Received:

Date Processed:

Renewal Date:

Career Pathway Level:

Please note that as an Entity Approved Instructor you are not able to create content but will be teaching content that has already been created by the approved Entity.

I. Applicant Information

Assigned Registry Identification Number (if applicable):

First Name:

MI:

Last Name:

Previous Last Name:

Date of Birth (mm/dd/yyyy):

Social Security Number: (Last 5 digits) -

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Mailing Address:

City:

State:

Zip Code:

County:

Primary Phone Number:

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Primary Email Address:

II. Entity Information

Name of Entity

Entity ID #:

Entity Representative Name:

Entity Rep. ID #

By signing below, I as the Entity Representative acknowledge that this application represents an individual that has been approved by the above Entity.

Entity Representative Signature _____

Date _____

West Virginia State Training and Registry System
611 7th Ave, Suite 322 Huntington, WV 25701 Phone: (304) 522-7827 or (855)-822-STAR Fax (304) 529-2535
www.wvstars.org Email: wvstars@rvcds.org

This program is being presented with financial assistance as a grant from the West Virginia Department of Health and Human Resources and the West Virginia Department of Education and is administered by WV Early Childhood Training Connections and Resources, a program of River Valley Child Development.

III. Professional Development Provider Agreement and Assurances

If approved as a WV STARS Credentialed Professional Development Provider, I agree to the following prior to providing any training registered under this system:

- ★ I will complete the WV STARS Credentialed Professional Development Provider Orientation session within 60 days of application processing.
- ★ I will maintain confidentiality regarding any information that may be viewable for attendees of training.
- ★ I will schedule all training to the training calendar and add attendance within 5 business days. I understand that a paper or electronic copy of the sign-in sheet must be maintained for 5 years.
- ★ I will provide all required information for participants to make an educated decision regarding a training, including Agenda, Contact Information, Location, etc.
- ★ I understand that as an Entity Approved Instructor, I may not create content but can add attendance for courses granted permission from the approved WV STARS Entity.
- ★ I will follow WV STARS Policy including, but not limited to, confidentiality and fraud.
- ★ I will abide by the terms of this agreement and fulfill my responsibilities as a WV STARS Entity Instructor. I understand that WV STARS reserves the right to suspend or revoke my credential if I do not consistently comply with the program requirements.
- ★ I have read, understand and will fulfill the ethical responsibilities to adult learners reflected in the core values, ideals and principles set forth in the NAEYC Code of Ethical Conduct, Supplement for Early Childhood Adult Educators.

(Available at: <https://www.naeyc.org/resources/position-statements/ethical-conduct>)

I, the undersigned, have read and agree to all statements indicated in this document. I hereby agree that the information provided in this application form is complete, accurate, and will be entered in the WV State Training and Registry System.

Signature

Date

Thank you for applying for a WV STARS Entity Instructor Credential. You will receive information about your credential within 60 days. Please note that the Entity Instructor Orientation must be completed within that time frame and you are able to register for this training via the WV STARS Training Calendar.

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