



SEPP TRAINING REGISTRATION FORM

Complete one form per person – print legibly
Copies available at www.childcarenetwork.cc

Educator Information:

Name: _____ EEC PQ Registry ID # (Required): _____
 Home Phone: _____ Cell: _____ Email: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____

Employment Information:

Provider/Program Name: _____ Supervisor/ Director: _____
 Work Address: _____ Work Phone: _____
 City: _____ Fax: _____

Provider Category: Administrator Family Child Care Group Child Care – Infant / Toddler
 Group Child Care – Preschool School Age (OST) Public School Parent
 Informal Child Care Provider Trainer (___High School, ___College, ___Adults) Other _____

Does your program accept EEC Vouchers? yes no
 Cost is \$5.00 per hour for Voucher Providers, \$10.00 per hour for Non-voucher providers.
 Would you be interested in enrolling in an ABE (adult basic education), GED, or ESOL (English for Speakers of Other Languages) program? yes no

Are you enrolled in a college degree granting program? yes no Which college? _____

Are you working towards? CDA NAFCC NAEYC Accreditation no, none of these

Are you interested in receiving coaching and / or mentoring support for any of the following?
 CDA Core Competencies Individual Professional Development Plan
 NAEYC NAFCC QRIS

Instructions to register

Pre-registration for all trainings is required. Walk-ins will not be accepted. Please register at least one week prior to class. In order to attend SEPP trainings you must have registered on EEC’s Professional Qualifications Registry. If you have not yet, please go to <https://www.eec.state.ma.us/PQRegistry/>
 Registration will not be taken by telephone, fax or email. Questions can be directed to: kristenl@cacci.cc
 All payments are non-refundable, unless enrollment is full or training is cancelled.
 Payment is made by check or money order payable to **Child Care Network**
 Mail payment to **Child Care Network 115 Enterprise Rd. Hyannis, MA 02601**
 Incomplete registration forms or registrations submitted without the correct payment will be returned unprocessed.

Training Title	Date(s)	Payment <small>_\$5.00 per hour for Voucher Providers, \$10.00 per hour for Non-voucher providers.</small>

Total Enclosed:

For more information, please check the EEC Professional Development Calendar at www.mass.gov/eec.