Room Number:	Room Name:	Ages of Children:	Avg. Daily Attendance:

Staff Name and Routine Daily Work Schedule

Staff Education

Name: _____

Position: _____

Date of Hire: _____

Date of Birth/Age: _____

Date CPR Expires: _____

Date First Aid Expires: _____

From _____ A.M./P.M. To _____ A.M./P.M.

Years of Experience: _____

Check Each Level of Education Completed:

- ☐ High School
- ☐ GED
- ☐ CCP Credential
- ☐ CDA Credential
- ☐ National Administrator Credential (NAC)
- ☐ Associate Degree
- ☐ BA/BS Degree
- ☐ Masters Degree
- ☐ Doctorate

Major field(s) for degree(s): _____

credit hours in early childhood education/development: _____

of clock hours of training completed in the past 12 months: _____

VERIFICATION **V** **NV**

Name: _____

Position: _____

Date of Hire: _____

Date of Birth/Age: _____

Date CPR Expires: _____

Date First Aid Expires: _____

From _____ A.M./P.M. To _____ A.M./P.M.

Years of Experience: _____

Check Each Level of Education Completed:

- ☐ High School
- ☐ GED
- ☐ CCP Credential
- ☐ CDA Credential
- ☐ National Administrator Credential (NAC)
- ☐ Associate Degree
- ☐ BA/BS Degree
- ☐ Masters Degree
- ☐ Doctorate

Major field(s) for degree(s): _____

credit hours in early childhood education/development: _____

of clock hours of training completed in the past 12 months: _____

VERIFICATION **V** **NV**

Name: _____

Position: _____

Date of Hire: _____

Date of Birth/Age: _____

Date CPR Expires: _____

Date First Aid Expires: _____

From _____ A.M./P.M. To _____ A.M./P.M.

Years of Experience: _____

Check Each Level of Education Completed:

- ☐ High School
- ☐ GED
- ☐ CCP Credential
- ☐ CDA Credential
- ☐ National Administrator Credential (NAC)
- ☐ Associate Degree
- ☐ BA/BS Degree
- ☐ Masters Degree
- ☐ Doctorate

Major field(s) for degree(s): _____

credit hours in early childhood education/development: _____

of clock hours of training completed in the past 12 months: _____

VERIFICATION **V** **NV**