



## ***EPR in Child Care Train-the-Trainer Course*** **Request for Approval**

Anyone interested in teaching the *EPR in Child Care* course who does not meet the pre-approved eligibility criteria must complete this form and the *EPR in Child Care* Application.

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

County: \_\_\_\_\_

Describe your experience in the field of child care and early education:

Describe your experience in the field of adult education and training:

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Email the Request for Approval and the Application as Word document attachments to Mary Cleary, course manager, at: [clearym@unc.edu](mailto:clearym@unc.edu)  
Call Mary Cleary at 919-707-5679 if you have questions.**

**The course manager will notify you of the approval or denial of your request within one month.**



***Emergency Preparedness and Response in Child Care***  
**Train-the-Trainer Course**  
**Application**

**Please type**

Name		County	
Job Title		Date of Birth	
Agency			
Agency Address			
Agency Phone		Fax	
	Direct Line/Extension: Cell Phone:		
Work Email Address			
Home Address		Fax	
Home Phone			
Degrees (list all)			
Licenses - list all state licenses			
Give a description of your experience with 1) child care and early education 2) providing adult education and training			
State your reason for applying for the <i>Emergency Preparedness and Response in Child Care</i> Train-the-Trainer course. Provide a brief description of how you will use the training to improve the quality of early care and education in NC.			
Date:	Signature:		

**Submit your application as a Word document attachment to: [clearym@unc.edu](mailto:clearym@unc.edu)**

**Call Mary Cleary at 919-707-5679 if you have questions.**