

Annual Training Form

Facility ID: _____

Individual's Name: _____

- Use one form for each individual who is required to complete annual training.
- **Face to Face** means training the individual attended in person. Submit copies of all face-to-face training documentation that is not available on the **CCPDI Training Registry**.
- At least half of your required training hours must be face to face.
- Your Licensor will review these completed forms as part of your **Annual Announced Inspection**.
- Enter minutes in 15-minute increments and use their hour value (15min = .25, 30min = .50, 45min = .75).
Ex. For a **training** that lasted 1 hour and 25 minutes, round the minutes to 30 and enter 1.50 hours.

Topics Covered	Date of Training mm/dd/yyyy	Face to Face Hrs	Non Face to Face Hrs	Training Delivered By:
Supervision and Ratios (CCL Rules Section 11)				
Injury Prevention (CCL Rules Section 12)				
Parent Notification and Child Security (CCL Rules Section 13)				
Child Health (CCL Rules Section 14)				
Child Nutrition (CCL Rules Section 15)				
Infection Control (CCL Rules Section 16)				
Medications (CCL Rules Section 17)				
Napping (CCL Rules Section 18)				
Child Discipline (CCL Rules Section 19)				
Activities (CCL Rules Section 20)				
Transportation (CCL Rules Section 21)				
Animals (CCL Rules Section 22)				
Diapering (CCL Rules Section 23)				
Infant and Toddler Care (CCL Rules Section 24)				
Review of the Department approved provider's Health and Safety Plan				
Signs and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements				
Positive guidance				
Total Hrs. & Min. on this page:				

Topics Covered	Date of Training mm/dd/yyyy	Face to Face hrs	Non Face to Face Hrs	Training Delivered By:
Principles of child growth and development, including brain development				
Preventing shaken baby syndrome, abusive head trauma, and coping with crying babies				
Preventing SIDS and use of safe sleeping practices				
Recognizing the signs of homelessness and available assistance				
Additional Child-Related Training Topics				
Total Hours on this page:				Total Annual Hours Completed: (face to face + non face to face) _____
Total Hours from page 1:				
Total Hours Pages 1 + 2:				