

Baby Steps: Training Report (2008 - 2009)

Period: _____ Center Name _____

List each caregiver who has attended training in the last reporting period.

Room	Caregiver Name	Infant/Toddler Training completed this quarter

List all **new** caregivers (first and last name), their date of hire and who they replaced:

New Caregiver	Date of Hire/transfer to room	Who they replaced

Evaluation of Training (Infant/Toddler Endorsement classes only):

Course # _____ Instructor's Name: _____ Dates: _____

Comments/Suggestions:

Course # _____ Instructor's Name: _____ Dates: _____

Comments/Suggestions:
