

Baby Steps: Training Report (2010-2011)

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	Start date in room	Classroom age/name	Who they replaced

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

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

Comments/Suggestions:

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Comments/Suggestions:
