



Center Staff Professional Development Record

Name: _____

Date of Hire: _____ Date of Birth: _____

Statement - child & abuse, convictions: _____

Driver's License: _____

Physical (3 yrs): _____

| | <u>Completed</u> | <u>Expires</u> |
|--|------------------|----------------|
| Iowa record checks (criminal, child abuse & sex offender registries) (2 yrs) | _____ | _____ |
| National FBI fingerprint checks (4 yrs) | _____ | _____ |
| CPR Training (1-2 yrs) | _____ | _____ |
| First Aid Training (2-3 yrs) | _____ | _____ |
| Universal Precautions Training (1 yr) | _____ | _____ |
| Mandatory Reporter Training (3 yrs) | _____ | _____ |
| Essentials Preservice Series | _____ | _____ |

| Date | Length (in hours) * | Training Organization | Course Title | Topic Area ** | Instructors |
|------|---------------------|-----------------------|--------------|---------------|-------------|
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*Mark any hours that are not creditable with DHS.
 **Topic Areas: A-Child Development, B-Guidance & Discipline, C-Developmentally Appropriate Practices, D-Nutrition, E-Health & Safety, F-Communication Skills, G-Professionalism, H-Business Practices, I-Cross Cultural Competence

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|------|---------------------|-----------------------|--------------|-----------------|-------------|
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