Professional Development Record for Center Staff

Name: _____

Date of Hire: _____ Date of Birth: _____

Statement - child & abuse, convictions: _____

	Completed	Expired
Driver's License:		
Physical (3 yrs):		

	Completed	Expires
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

*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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