

TRAINER PROFILE



Date of Profile : _____

Date Received: _____

Application # _____

For office use only

TRAINER CONTACT INFORMATION

Trainer Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E mail: _____

Are you a member of a Training Registry? If so:

Name/Location: _____

SPONSORING AGENCY CONTACT INFORMATION

If you are training under the direction of a sponsoring agency, please complete the following information.

Sponsoring Agency Name: _____

Contact Person: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E mail: _____

TRAINER QUALIFICATIONS

Please complete the following information regarding formal degree completion.

Degree/Institution	Major Area of Study	Courses completed related to out-of-school time	Date conferred
High School/GED			
Associate			
Bachelor			
Master			
Doctorate			

Please complete the following information regarding credentials/certifications/licenses that allow you to train in specialized areas. Include such certifications as School age/ Youth Development Training, Train-the-Trainer, Director Credential, Adult Learning Principles, etc., working with children with special needs, cultural competency, etc.

Certificate/Credential/ Licenses Type	Awarding Agency/ Institution	Date Credentialed	Clock Hours

AREAS OF CONCENTRATION

Please indicate areas in which you are proficient to train, audience type (directors, administrators, direct service staff, teachers, parents, etc.) at what audience level (beginning, intermediate, advanced).

Core Area	Verified hrs of Professional Training	Audience Type	Audience Level	Date of Training
Growth & Development				
Family/Community Relationship				
Program Development				
Program Environments				
Professional/Personal Development				
Curriculum Planning				
Adult/Child or Youth Interaction				



Program Leadership				
Health & Safety				
Nutrition				
Diversity				
Observation/Screening				

TRAINER PROFESSIONAL RECORD

Please indicate steps you have taken to enhance your professionalism, including memberships in professional organizations, presentations at conferences, published articles, professional panels served, offices held in professional organizations, etc.

Your Role	Organization/Publication	Date	Audience

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TRAINER LANGUAGE PROFICIENCY

Please check language(s) in which you can provide training.

- English
- Spanish
- Creole
- French
- Portuguese
- Chinese
- Other, please indicate: _____

TRAINER AVAILABILITY & PREFERENCE

Please indicate where and when you would be available to train.

City	Location State	Type of facility (i.e. center, home, off-site, etc.)	Audience Size

CONTENT EXPERTISE -STAFF

Please indicate in which core competencies you are qualified to instruct. The core competencies can be found at www.naaweb.org

KNOWLEDGE AREA 1: Ability to relate to and work well with diverse children and youth

- positive relationships
- safe environments
- meaningful engagement
- human and cultural diversity

KNOWLEDGE AREA 2: Ability to facilitate participant's learning of new knowledge and skills

- support program goals
- support school success
- community awareness
- physical health
- learner-centered environments

KNOWLEDGE AREA 3: Ability to respectfully engage the important adults in the participants' lives

- family involvement
- advocacy and referral

KNOWLEDGE AREA 4: Commitment to one's own learning, skill building and professionalism on the job.

- self-improvement
- work and team ethics
- Communication skills

KNOWLEDGE AREA 5: Ability to effectively carry out program operations and policies to achieve program goals and meet needed requirements

- Health and safety

CONTENT EXPERTISE -SUPERVISOR

- KNOWLEDGE AREA 1:** Ability to articulate within the organization and to external stakeholders the program's mission and goals and how program activities align to them.

communicates goals and mission

- KNOWLEDGE AREA 2:** Ability to design program activities that support program goals and incorporates needs and interests of program participants, their families and the broader community

- KNOWLEDGE AREA 3:** Ability to successfully manage program staff

- KNOWLEDGE AREA 4:** Ability to promote the professional growth and development of program staff

- KNOWLEDGE AREA 5:** Ability to engage and support youth workers in implementing program activities to achieve program goals

- KNOWLEDGE AREA 6:** Has a working knowledge of and able to use resources within the broader community

- KNOWLEDGE AREA 7:** Ability to gather and review program data for timely program improvement

REQUIRED INFORMATION TO BE ATTACHED

Please include the following information with the Trainer Profile.

- A resume noting education background and professional experience
- Copy of college transcripts (if requested)
- Copy of professional licenses and/or certifications
- Copy of certificates for professional trainings
- Two letters of reference from persons associated with your professional training experience

I certify that all information in this profile is true and accurate. I agree to adhere to the National AfterSchool Association's Code of Ethics, which I have read carefully.

Name: _____

Date: _____