



Iowa CCR&R Network  
**Instructor Application**

Has applicant made an instructor request via the Child Care Training Registry?  Yes  No  
*(Training Registry is not yet available. You will be notified when it is.)*

Applicant Name:	Phone:
Previous Name: (if applicable)	2 <sup>nd</sup> Phone:
Address:	
City/State/Zip:	Email:

Professional Title:	Agency:
Instructor Level applying for: <input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 3 <input type="checkbox"/> Specialty Instructor    Describe:	
List specific curricula wishing to instruct:	
<input type="checkbox"/> Initial Application <input type="checkbox"/> Re-application	

Choose one of the (3) three following options. Submit all applications in writing to the Regional Training Coordinator

**1. Prospective instructors NOT employed by CCR&R or a DHS approved Training**

**Organization:**

- Instructor Application
- Letter of intent
  - Statement as to why Applicant wishes to become an instructor for CCR&R
  - Description of Applicant professional development plan
  - Description of Applicant's understanding of, and experience in, working with diverse populations
- Resume/Vitae
- Official Transcripts or a copy of current professional license
- Three current letters of recommendation (dated within 90 dates of application)
- Additional documentation as stated for specific CCR&R approved curricula

**2. Instructors currently employed by CCR&R or other DHS approved Training**

**Organizations:**

- Instructor Application
- Documentation of employment
- Resume/Vitae
- One current letter of recommendation from a colleague or supervisor within the agency of employment (dated within 90 dates of application)
- Additional documentation as stated for specific CCR&R approved curricula

**3. Instructor re-application:** (every 5 years or for advancement)

- Instructor application & documentation as stated above
- Documentation of observations
- Documentation of training evaluations by participants
- Documentation of continuing education in the content area
- Documentation of continuing education in adult learning
- Proof of Instructor Orientation attendance

After the instructor selection process, applicant will receive:

- Letter of decision
- Facilitator agreement
- Instructor agreement
- Policies & procedures

**Please submit the Instructor Application to:**

Carol Jensen, Regional Training Coordinator  
West Central Community Action  
Child Care Resource & Referral  
PO Box 709  
Harlan, IA 51537  
712-755-7381 or 800-945-9778  
Fax: 712-755-7827  
[cjensen@swiowachildcare.org](mailto:cjensen@swiowachildcare.org)



For Office Use Only	
Date Received:	Date Decided:
Decision (check one): <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Renewal Date: (Instructors shall re-apply every 5 years)
Reason for Denial:	