

# CEC Application Form\*

## Application Form for Individuals Applying For CECS

This form is also available electronically at [www.mass.gov/dph/earlyintervention](http://www.mass.gov/dph/earlyintervention); click on “Early Intervention Training Center.”

### Section 1: Application Cover Page (Required for All Applicants)

#### A. APPLICANT INFORMATION

Applicant Name	
Agency Name (if applicable)	
Address	
City and State	
Zip Code	
Telephone	
Fax	
E-Mail	

#### B. APPLICATION TYPE

<input type="checkbox"/>	Single Workshop	
<input type="checkbox"/>	Conference	Number of workshops (Complete application for each workshop)
<input type="checkbox"/>	Distance Learning	

\*This form is not to be included as part of the portfolio submission.



A certificate of completion or equivalent must be submitted with all applications.

**C. TITLE OF OFFERING**

**D. TRAINING SITE (CITY AND STATE)**

**E. DATE OF OFFERING**

**F. PRESENTERS**

**G. NUMBER OF INSTRUCTIONAL HOURS (INDICATE FIELD EXPERIENCE HOURS IF APPLICABLE)**

**H. COMPETENCY INDICATORS TO BE ADDRESSED**

List competency indicators and note where the supporting evidence is located:

Competency Indicators Requested	Location of Evidence in your Application

I certify that all of the information provided with this application is accurate and complete.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**SECTION 2: Training Information (Required for All Applicants)**

**A. ABSTRACT/OVERVIEW** (1,000 character max)

[Empty text area for Abstract/Overview]

**B. PARTICIPANT LEARNING OUTCOMES**

List the expected outcomes for participants, being as clear and specific as possible. Include information about the specific knowledge and skills addressed (1,000 character max).

[Empty text area for Participant Learning Outcomes]



**C. METHODOLOGY**

Check all that apply.

<input type="checkbox"/>	Small group interactive discussion	<input type="checkbox"/>	Role play	<input type="checkbox"/>	Project/assignments (attach detail)
<input type="checkbox"/>	Large group lecture format/didactic presentation	<input type="checkbox"/>	Hands-on, experiential	<input type="checkbox"/>	Structured field experience (attach description; may not exceed 15% of total instructional hours):
<input type="checkbox"/>	Video	<input type="checkbox"/>	On-line discussion		
<input type="checkbox"/>	Other, please describe below (1,000 character max):				

**D. EVALUATION**

Briefly describe how this Professional Development experience influenced your work as an Early Intervention Specialist (1,000 character max).





**E. REQUIRED ATTACHMENTS AND INFORMATION**

**Single Workshop/Distance Learning/Conference Applications**

**Training Outline and Materials (Check all that apply):**

- |   |   |
|---|---|
| <input type="checkbox"/> Handouts                   | <input type="checkbox"/> Slides/Overheads |
| <input type="checkbox"/> Bibliography/Resource List | <input type="checkbox"/> Other            |

Be sure to include any PowerPoint or presentation materials and indicate where the key concepts and content are covered in this training. Be clear about how the competency indicators were addressed.

Include books, journal articles, videos, internet resources, brochures, and other resources in the bibliography/resource list as applicable.

<b>Agenda</b>	Include timeframe of instructional activities
<b>Instructor Information/ Training Organizer</b>	Attach brochure or information about who offered the training
<b>Proof of Attendance</b>	Certificate of completion or attendance must be attached

**SECTION 3: Training Hours and Number of Competency Indicators Allowed**

A minimum of 1.5 hours of instructional time is required for a single competency indicator. Multiple indicators can be addressed in the same training, with the requirement of a minimum of 1 hour per competency indicator, as indicated in the chart below:

Length of Workshop	# of Competency Indicators
Less than 1.5 hours	0
1.5 hours	1
2 hours	2
3 hours	3
4 hours	4
And so on...	