

MICHIGAN CHILD CARE AND EDUCATION PROFESSIONAL DEVELOPMENT RECORD FOR CHILD CARE CENTERS

Michigan Department of Licensing and Regulatory Affairs

Child Care Licensing Bureau

Use this form to record training experiences including, but not limited to, workshops, community-based training, college courses, conferences.

- To comply with Michigan Child Care Licensing Rules for **Child Care Centers** all child care staff members who work directly with children and program directors must complete a total of **16 clock hours** of training annually. Training must be accrued annually during the calendar year. CPR and first aid training may count for up to 2 hours of training in the year taken. *R 400.8131(6) R 400.8181(7)*
- **Verification of participation of required training is to be kept on file or be recorded on MiRegistry by the facility for licensing review.** *R 400.8131(11)*
- Refer to Michigan Child Care Licensing Rules for a list of topics and trainings that meet training requirements. Rules can be found at www.michigan.gov/michildcare.
- 1 clock hour of training = 60 minutes. Record the actual number of training hours not including breaks, lunches or travel.

Child Care Staff Member's Name	Date of Hire
Facility Name	License Number

Core Knowledge Areas from the Michigan Core Knowledge and Core Competencies for the Early Care and Education Workforce (available at www.michigan.gov/greatstart)	
1. Child Development	5. Teaching and Learning
2. Health, Safety and Nutrition	6. Observation, Documentation and Assessment
3. Family and Community Engagement	7. Interactions and Guidance
4. Management	8. Professionalism

Training Date(s)	Title of Training	Core Knowledge Area(s)	Training Organization/Presenter	Number of Clock Hours	Training Certificate Received	Recorded on MiRegistry	Number of IACET CEUs or SCECHs Earned (if applicable)	Number of College Credits Earned (if applicable)
	Orientation on Center's Policies/Practices and Child Care Licensing Rules <i>R 400.8131(1)</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	First Aid and Infant, Child, Adult CPR <i>R 400.8131(10)</i> <input type="checkbox"/> Trained <input type="checkbox"/> Certified	2			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Health and Safety Trainings <i>R 400.8131(3-5)</i>	2			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Health and Safety Annual Refresher <i>R 400.8121(12)</i>	2			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
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