



# 2020 Training Scholarship Application

June 24-25, 2020

Sheraton Sand Key Resort, 1160 Gulf Blvd, Clearwater Beach, FL 33767

Reminder: Hotel room reservations (727-595-1611) must be made by May 17th.



**Registration Fee: Varies** (\$59 & \$79 scholarships available)

To qualify for a pre-conference training scholarship, recipient must be a FFCCHA member and a Florida licensed or registered provider or co-provider. Membership **must** be valid through June 2020.

Applications will be accepted on a first come, first serve basis.

## **Please submit your application, no later than May 1, 2020**

Only completed forms with **payment to FFCCHA for each** scholarship requested will be accepted. No Refunds. Forms will be dated as received, in case we exceed the allotted amount of scholarships available.

**You will be notified by May 15, 2020 as to your acceptance.**

**A separate application must be completed for each scholarship requested.**

Select with a check mark which training you are requesting a scholarship for:

Select	DATE	TIME	TRAINING TITLE	FEE	Scholarship	PAY
	Wed. 6/24	8:00 am – 5:00 pm	<b>ME! Mentoring Essentials*</b>	\$89	\$79	\$10
		10:00 am – 5:00 pm	<b>Full STEAM Ahead</b>	\$69	\$59	\$10
	Thurs 6/25	8:00 am – Noon	<b>Mentor 1 Certification*</b>	\$89	\$79	\$10
		8:00 am – Noon	<b>Dump Trucks, Dishes &amp; Dirt</b>	\$69	\$59	\$10
		8:00 am – Noon	<b>Building &amp; Branding Your Business</b>	\$69	\$59	\$10
		1:00 – 5:00 pm	<b>Inspiring Play with Loose Parts</b>	\$69	\$59	\$10
		1:00 - 5:00 pm	<b>Container Gardening</b>	\$69	\$59	\$10

*\* This is the 12-hour training for Mentor I certification, must attend both days. Pre-qualifying application required for certification.*

Name: \_\_\_\_\_ Chapter: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Fax #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Please explain in a minimum of 30 words why you want this training scholarship: (Requirement)**

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### **PLEASE READ THE FOLLOWING STATEMENT ---- SIGN AND DATE!**

I, the undersigned, do hereby state:

- \* The above information is correct to the best of my understanding.
- \* I am a current member of FFCCHA, Inc. and a Florida \_\_\_licensed \_\_\_registered or \_\_\_Co-provider
- \* I understand if I do not **attend** the pre-conference training that I have been given a scholarship, I will be responsible for the full cost of the training.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If you need an accommodation because of a disability to participate in the child care training process; contact Abbie Bill at least two weeks prior to the first training date at (561) 482-6038 between the hours of 8:00 am and 5:00 pm. Calls can be received Monday through Friday.*

**Mail this completed form (full page) to FFCCHA – Abbie Bill, 9207 Edgemont Lane, Boca Raton, FL 33434**

All pre-conference scholarships go quickly. So don't be left out! Send in completed form today!

Returned checks will be assessed a \$47 fee in addition to the amount of the check.

Office Use Only: Date rec'd: \_\_\_\_\_ Regulation type: \_\_\_\_\_ Membership Expiration: \_\_\_\_\_