

BCAEYC TRAINING GRANT REQUIREMENTS

Guidelines for workshops:

- a. Center must meet state licensing requirements to qualify. Enclose documentation.
- b. Two staff must be members of BCAEYC for a minimum of 90 days
- c. Training must be free to all BCAEYC members
- d. Non-members may be charged a nominal fee which is to be returned to BCAEYC within 30 days of the session.
- e. Training documentation (attendance, evaluation forms and proof of payment with amount paid to trainer) must be returned to BCAEYC within 30 days of the session.
- f. A portion of your copying and postage can be requested in the grant application.
- g. Refreshments are the responsibility of the hosting center.
- h. Address labels are available from BCAEYC for \$15. This charge can be reimbursed.
- i. The application must be submitted at least one month prior to the training.
- j. There must be two specific methods of informing BCAEYC members of the training. Example: BCAEYC newsletters, BCAEYC website, or flyers.
- k. Training funds will be sent to the center following receipt of documentation.
- l. Maximum request can be no more than \$300.
- m. Send 3 copies of the application to:

Jayne Jacobus
St. Paul's Preschool
2131 Palomino Drive
Warrington, PA. 18976

Updated 6/23/09

APPLICATION FOR TRAINING GRANTS

Center sponsoring training: _____

Contact person: _____ Title _____

Telephone: _____ Fax: _____ E-mail: _____

Current member of BCAEYC: Yes _____ No _____

Name/addresses of two staff members who are BCAEYC members:

Name: _____

Address: _____

2.

Name: _____

Address: _____

Amount needed for this training: \$ _____

Other sources of funding: _____

Total amount requested for this training from BCAEYC: \$ _____

Total # of training hours: _____

Total # of staff to be trained: _____

Date and time of training: _____

Location of training: _____

(complete both sides)

Title of training: _____

Presenter of training: _____

Description of training: _____

Methods to inform BCAEYC members of training (flyer, BCAEYC website, BCAEYC newsletter, etc.) _____

Projected Budget for Training

Funds requested from BCAEYC: \$ _____

Projected expenses: Explain \$ _____

Projected income: Explain: \$ _____

Signature _____ Date: ____/____/____

Send to: Jayne Jacobus
St. Paul's Preschool
2131 Palomino Drive
Warrington, PA. 18976
Phone: 215-343-1563

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