

## Coaching Verification Form

Include this form with your PD Stipend Request by May 14th, 2021 to verify completion of at least 4 coaching cycles completed between 7/1/20-5/14/21.

Name	
Child Care Program	
Coach	

Coaching sessions must be based on Child and School Readiness, Teaching Practices (i.e. CLASS, DAP), or Program and Environments (i.e. ERS, using/creating a curriculum based on developmentally appropriate practices). Coaching sessions are tailored to your schedule, individualized to support you, and can be done on-site, individually, remotely and/or team learning.

Beginning Cycle Date	Primary Topic	Additional Topic	Completed Cycle Date
1.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
2.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
3.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
4.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
5.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
6.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
7.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
8.	<input type="checkbox"/> Child and School Readiness <input type="checkbox"/> Teachers and Teaching <input type="checkbox"/> Program and Environments		
TOTAL CYCLES			

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

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