

REVISED 07.19.2022

Provide Activity Name:

Instructions: Please complete a separate chart for each activity. Indicate the name of the activity. You may copy this blank version as many times as you need and either submit separately or in one workbook with multiple tabs per activity. The items with an asterisk (*) represent some of the required TA approval criteria noted on page 11 of the RFP. Respondents to this RFP can ask personnel to provide their Registry Education & Training Report so some chart items can be completed by Respondent. Do not attach Registry reports. If personnel or subcontractors do not have a Registry ID, please comment in your plan intent to obtain a Registry ID. Individuals may create an account at www.ccacregistry.org

Org	Organization Personnel													
	Last Name	First Name	Title	*Registry ID (noted on Education Report)	Full-time or Part - time Employee	Proposed Monthly Hours Dedicated to Activity	*Adult Learning (3 credit course or OEC AL 1,2,3,4) - noted on Education Report	*Degree and Concentrat ion (noted on Education Report)	*NAEYC Attestation uploaded in the Registry (yes/no)	TA Experience (number of years providing TA)	Speaks languages other than English (indicate language)	List languages can translate and/or train in language other than English	Relevant content knowledge related to activity	Other Relevant Exp/Knowl edge
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Sub-Contractors

	Last Name	First Name	Title	*Registry ID (noted on Education Report)	N/A	Proposed Monthly Hours Dedicated to Activity	*Adult Learning (3 credit course or OEC AL 1,2,3,4) - noted on Education Report	*Degree and Concentrat ion (noted on Education Report)	*NAEYC Attestation uploaded in the Registry (yes/no)	TA Experience (number of years providing TA)	Speaks languages other than English (indicate language)	List languages can translate and/or train in language other than English	Relevant content knowledge related to activity	Other Relevant Exp/Knowl edge
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Plar	Plan for Recruitment and Support													