



## CHILD CARE FAMILY HOME APPLICATION CAREGIVER TRAINING RECORD FORM

Facility Name \_\_\_\_\_ License Number \_\_\_\_\_

Caregivers				Date Training Completed				
Name	Position	Date of Hire	PDR #	Strengthening Families	Early Learning Standards (CDELS) Basics	FCCERS	Nutrition (required annually)	Physical Activity

Save a copy of all documents for your records. Submit the completed application with documentation online through your ELS portal. For more information: [www.ARBetterBeginnings.com](http://www.ARBetterBeginnings.com) Phone: 501-320-6161 Email: [OEC.BetterBeginnings@ade.arkansas.gov](mailto:OEC.BetterBeginnings@ade.arkansas.gov)