



Child Welfare Provisional Certification Pre-Service Training Verification Form – BATCHED Applicants

Effective Date: 2-3-2021

Directions

1. This form is for **Preservice** applicants attending child welfare pre-service training as a cohort. The trainer may use this single form to verify compliance with pre-service training requirements for all students identified in Part 4 of this form.
2. Forms **MUST** be typed. Illegible handwritten forms will be returned, which may impact processing timeframes.
3. Employing agencies are required to ensure that each applicant “attends and completes all of the pre-service classroom, online, and field instruction required for his or her position classification” (65C-33.003(3)(a), F.A.C.). Supporting documentation is maintained by the employing agency and must be made available to FCB in case of audit.
4. Pre-service curriculum must be delivered by a Certified Child Welfare trainer pursuant to 65C-33.016, F.A.C., with the exception of Department approved academic programs teaching the Pre-Service curriculum pursuant to 65C-33.016(8), F.A.C.
5. This form serves as the training provider’s “roll-up sheet”, allowing them to account for all of the documented pre-service training provided to the cohort of applicants identified in Part 4 of this form. A separate form must be completed by each certified trainer/academic instructor. The lead trainer will complete the form for a training delivery team.
6. The certified trainer/academic instructor completes this entire form. Completed forms are to be provided directly to the Training Entity’s Point of Contact. These forms must, in total, document the full child welfare preservice training per 65C-33.003. The Training Entity Point of Contact will collect, review, and submit complete forms to the FCB as soon as possible, **but no more than five (5) business days after the applicant earned a passing score on the CWPI or CWCM exam**. This form must be approved before the provisional credential will be issued.
7. Please contact the FCB if you need the name and email address of your region’s assigned Certification Specialist.

Part 1: Certified Trainer/Instructor Information. Enter requested information for each certified trainer or academic instructor. If a team of certified trainers delivered pre-service, the lead trainer should complete this form.			
Name _____	Title _____		
Employer _____	Email Address _____		
CWT Credential Number _____	<input type="checkbox"/> N/A – I am an academic instructor per 65C-33.016(8), F.A.C.		
Part 2: Curriculum Information. Identify the training/instruction provided to the applicant identified in Part 4.			
<input type="checkbox"/> DCF Pre-Service Training Curriculum – CORE Modules	_____	_____	
	Start Date	End Date	
<input type="checkbox"/> DCF Pre-Service Training Curriculum – Academic Coursework*	_____	_____	
	Start Date	End Date	
<input type="checkbox"/> DCF Pre-Service Training Curriculum – PI Specialty Track Modules	_____	_____	
	Start Date	End Date	
<input type="checkbox"/> DCF Pre-Service Training Curriculum – CM Specialty Track Modules	_____	_____	
	Start Date	End Date	
<input type="checkbox"/> DCF Pre-Service Training Curriculum – LC Specialty Track Modules	_____	_____	
	Start Date	End Date	
<input type="checkbox"/> Other (describe): _____	_____	_____	
	Start Date	End Date	
Part 3: Attestation of Competency Demonstration			
I consent to an audit of related agency records to verify my attestation, if requested by FCB.			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>By my signature, I attest that the above material is true to the best of my knowledge.</i>			
_____ Signature (FCB accepts both manual and electronic signatures)		_____ Date	

*Attach a copy of the applicant’s unofficial college transcript or other university based documentation to verify completion of coursework

