

West Virginia



**Infant/Toddler Professional
Development Program**

2016 Infant/Toddler Summit Application

Return to: Joyce Tucker, 350 Capitol St., Room B-18, Charleston 25301

Fax: (304) 558-8800

Email: Joyce.m.tucker@wv.gov

Name _____ Position _____

Center Name _____

Center Address _____

Center Phone Number _____

Email Address _____

Size of Center: Type I _____ Type II _____ Type 3 _____
(Up to 30 children) (31-60 children) (61 or more children)

Do you participate in the Tiered Reimbursement Program? _____

Are you NAEYC Accredited? _____

Number of children up to 24 months enrolled? _____

Number of children 25 to 35 months enrolled? _____

Please indicate how many current staff have attended each training.

WVIT I _____ WVIT II _____ Great Beginnings _____ Infant/Toddler Summit (2015) _____

Name(s) of Assistant Director or other Infant/Toddler Staff attending with Director:

1. _____ 2. _____

3. _____ 4. _____

Location you are applying for: Martinsburg Beckley Clarksburg