FORM SA
SPECIALTY COMMUNITY & MASTER TRAINER APPLICATION

1. Name: ____________________________ ____________________________ ____________________________ ____________________________
   Last                   First                   Middle                   Former Name(s)

2. Application Date: ____________________________

3. I am applying to be a:
   [ ] Specialty Community Trainer (Add Form SB)   [ ] Specialty Master Trainer (Add Form SC)

4. GEOGRAPHIC AVAILABILITY. Which counties are you willing and able to train in?
   [ ] All counties/statewide
   [ ] Baker
   [ ] Douglas
   [ ] Lake
   [ ] Sherman
   [ ] Benton
   [ ] Gilliam
   [ ] Lane
   [ ] Tillamook
   [ ] Clackamas
   [ ] Grant
   [ ] Lincoln
   [ ] Umatilla
   [ ] Clatsop
   [ ] Harney
   [ ] Linn
   [ ] Union
   [ ] Columbia
   [ ] Hood River
   [ ] Malheur
   [ ] Wallowa
   [ ] Coos
   [ ] Jackson
   [ ] Marion
   [ ] Wasco
   [ ] Crook
   [ ] Jefferson
   [ ] Morrow
   [ ] Washington
   [ ] Curry
   [ ] Josephine
   [ ] Multnomah
   [ ] Wheeler
   [ ] Deschutes
   [ ] Klamath
   [ ] Polk
   [ ] Yamhill

5. I am willing and able to provide training in the following language(s):
   [ ] English
   [ ] Russian
   [ ] Vietnamese
   [ ] Chinese
   [ ] Spanish
   [ ] Other: ____________________________

6. I have completed the Oregon Registry Trainer Orientation: [ ] Yes   [ ] No
   If Yes, please attach a copy of your completed orientation quiz.

7. LISTSERV SUBSCRIPTION. I wish to subscribe to the OCCD Listserv, “Trainer Notes.” OCCD will use this electronic means of communication to distribute resources and information regarding professional development and adult development for trainers. (A valid, working email address is required to subscribe to the Listserv.)
   [ ] Yes   [ ] No   Email: ____________________________

8. I attest that I have read the NAEYC Code of Ethical Conduct and Statement of Commitment and Supplement for Adult Educators (naeyc.org/positionstatements/ethical_conduct). I commit myself to the code's ideals and principles as the core values of our profession and as my work as an adult educator.

   Applicant Signature ____________________________ Date Signed ____________________________

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Revised January 2010