

Trainer Agreement Form Fall 2019

You have been selected to join the CalSAC Trainer Network and attend the Fall 2019 Training of Trainers (ToT) Institute on October 17-19 in Palo Alto, CA. Complete and return this Trainer Agreement Form to the CalSAC office by email, fax, or mail no later than **Friday, September 27, 2019**. Please note that your spot may be released to a waitlisted applicant if your agreement is not received by the deadline.

Submission Method	Contact Information
Email	To: Diana Quintana dquintana@calsac.org
Fax	Attn: Diana Quintana (510) 444-4623
Mail	CalSAC Trainer Network Attn: Diana Quintana 1918 University Ave, 4B Berkeley, CA 94704

I understand that by joining the CalSAC Trainer Network, I commit to the following:

1. Participate in the full 3-day Training of Trainers Institute on October 17-19 in Palo Alto, California. Attend a scheduled orientation webinar and pay the enrollment fee by credit card or check by Friday, September 27. The enrollment fee includes three days of training, materials, and some provided meals. Transportation is not provided.
2. Complete the following with support of a CalSAC Mentor:
 - Submit a CalSAC Trainer Self-Assessment prior to the Training of Trainers Institute
 - Participate in one 2-hour regional cohort training
 - Complete 14 hours of CalSAC training
 - Complete a 2-hour training observation from a CalSAC Mentor
3. Utilize the CalSAC Training Portal to manage training events and maintain a trainer profile.

Participant Full Name (print): _____

Participant Signature: _____ Date: _____

SUPERVISOR'S APPROVAL (To be signed by your supervisor)

I support the above applicant in joining the CalSAC Trainer Network, attending a 3-day Training of Trainers Institute, and fulfilling this training and professional development opportunity.

Supervisor's Full Name (print): _____ Title: _____

Supervisor's Signature: _____ Date: _____