

Child Care Center Pre-Licensing Workshops Schedule July, August and September 2018



Cities	Dates	Days	Locations	
Durham (Full)	7/24 & 7/25	Tues. & Wed.	Child Care Services, 1201 South Briggs Ave., Suite 200	
Charlotte (Full)	7/31 & 8/1	Tues. & Wed.	Providence Preparatory School, Providence Bldg., 3031 Providence Rd	
Wilmington (Full) 8/8 & 8/9		Wed. & Thurs.	University of Mount Olive at Wilmington, 1838 Sir Tyler Dr., Rm 136	
Winston-Salem	(Full) 8/21 & 8/22	Tues. & Wed.	Smart Start of Forsyth County, 7820 North Point Blvd., Suite 200	
Greenville (Full) 8/28 & 8/29	Tues. & Wed.	Martin/Pitt Partnership for Children, 111-B Eastbrook Dr.	
Raleigh (Full)	9/5 & 9/6	Wed. & Thurs.	Raleigh Lions Clinic for the Blind, 2701 Noblin Rd., Suite. 2705	
Hickory (Full)	9/12 & 9/13	Wed. & Thurs.	Partnership for Children, Early Childhood Resource Center,	
			738 4 th St., Southwest	
Fayetteville (Fu	II) 9/19 & 9/20	Wed. & Thurs.	Cumberland County Dept. of Social Services, 1225 Ramsey St., Rm D	

WORKSHOP DESCRIPTION: The first day of this workshop will focus on child care in North Carolina. Participants will receive a comprehensive review of the North Carolina Child Care Requirements and obtain critical information helpful to potential child care center operators. The second day of training will focus on best practices regarding program start-up and operation as it relates to budgeting for quality care. Workshops will begin at 9:30 a.m. and end at approximately 3:30 p.m. Five (5) hours of training credit will be given for each day of training. For religious sponsored programs, the pastor or his/her designee, such as a Board Member, Associate Pastor, or Youth Pastor, who serves in an official church business capacity must attend the workshops. *These workshops are not designed for potential providers of Family Child Care Homes.

REGISTRATION INFORMATION: *Pre-registration is required and <u>each person registering must submit the registration form at the bottom of this page</u>. Attendance at each workshop is limited by the size of the facility. Registrants will be notified (if registration is received seven (7) days in advance of workshop date) by e-mail (if available) or mail of their acceptance prior to the workshop date. If you have not received confirmation prior to the workshop, you will need to call and confirm that your registration has been processed. *The deadline for registration is two (2) weeks prior to the workshop date.

The fee for each person attending is \$100.00. Persons who are unable to attend a workshop may receive (1) one free transfer registration for a future workshop within this quarter at no additional cost with three (3) business days' prior notice of the initial workshop date. Registration fees are non-refundable. You may send an email to DCD.Prelicensing@dhhs.nc.gov for general workshop registration information or to speak with the Pre-Licensing Coordinator, call 1-800-859-0829 (in state only) or 919-527-6335. Return the registration form below along with payment (certified check, money order or business check) for the correct amount to: Division of Child Development and Early Education, Prelicensing Workshop, 2201 Mail Service Center, Raleigh, NC 27699-2200.

NOTE: In case of inclement weather, please call 1-800-859-0829 (in state only) or 919-527-6335 for workshop cancellations.

Registration Form for Child Care Center Pre-Licensing Workshop

Name (please print)

Address

STREET/APT. CITY ZIP COUNTY

Telephone Home (_____) Work (_____)

Fax (_____) E-mail

Workshop Location Workshop Dates

Workshop Location (2nd choice) Workshop Dates (2nd choice) _____

Please check type of payment enclosed: No personal or starter checks will be accepted.

□Certified Check □Money Order □Business Check (payable to: **Division of Child Development and Early Education, Prelicensing Workshop, 2201 Mail Service Center, Raleigh, NC 27699-2200**. I understand and agree that the **Division of Child Development and Early Education** will not be held responsible for any liability, theft, or damage that might occur during this workshop.

AMOUNT ENCLOSED \$	SIGNED	DATE
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