



National Family Development Credential® Program
FDC™ Instructors' Training Institute Application Form

Virtual Instructor Institute via WebEx

February 26- March 1, 2024 -- 10am-4pm ET

Name (Mr/Ms): _____ FDC Credentialed? Y/N
Please type or print clearly.

Position: _____

Full Organization Name: _____

Organization Address: _____

Town/City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ Fax: (_____) _____

E-mail: _____

Degree _____ Institution _____ Date completed _____

Requirement: A Bachelor's Degree is required or a direct oversight by an FDC Instructor with a BA.

Instructor Name: _____

Application deadline/fees: Early bird applications should be received by 12/29/23 (\$825). All Applications should be submitted no later than 1/29/24 (\$875). Please note that there are a limited number of places and applications will be accepted on a first-come basis. Please return completed application with answers to nationalfdc@uconn.edu for consideration. Also, Cc your signing supervisor when submitting. Once the review process is complete, applicants will be notified via email. Following acceptance, an invoice will be provided for the registration fee excluding required books.

Instructor's Institute Application Questions: Please prepare and submit responses with your application to the following three questions: (no longer than 3 pages, double-spaced)

- 1. Summary of role facilitating or supporting FDC
2. Experience facilitating other interactive trainings, college instruction or professional workshops
3. How do you envision offering the "Empowerment Skills for Workers" series in a manner that complements existing FDC courses in your community?

If more than one person is applying from an organization or coalition, please attach the same answers to question 3, but all applicants must complete their own responses to questions 1 and 2.

Statements of Commitment by Candidate & Supervisor (Required)

Candidate's commitment - If accepted, I will make a commitment to virtually attend all five sessions of the FDC Instructor's Training Institute, obtain related publications, and ensure payment of the registration fee.

Signature _____ Date _____

Supervisor's commitment - I support the candidate's plan to become an FDC Instructor and will work with her/him to ensure that time is available for this program to be offered and all related fees are paid.

Signature _____ Print name _____

Position: _____ Date _____

Email: _____ Phone: _____

*Electronic signatures will be accepted.