



● NEW HANOVER COUNTY ●

Smart Start of New Hanover County
3534 S. College Rd., Suite F
Wilmington, NC 28412
910.815.3731
www.newhanoverkids.org

Smart Start Early Care and Education Health & Safety Private Training Request

Program Name: _____

Complete Address: _____

Contact Name: _____ **Phone:** _____

Email: _____

How would you like this training to be provided? onsite* Smart Start virtually

Approximately how many staff will attend training^? _____

What age groups do they teach? infant toddler preschool

List any dates/times you'd prefer: _____

Please describe the type of health & safety training you are requesting (diapering, sanitation, health practices, medication administration, etc.): _____

Procedure for private training requests:

- Private training requests are accepted on a first come-first served basis and scheduled as the consultant's caseload allows.
- Training requests must be received at least 10 business days prior to date requested for training.
- Upon receipt of the request, the CCHC will contact you to confirm date/time and details of training.
- *Trainings conducted at program sites must be able to accommodate space for group work, tables/chairs, as well as access to power outlets.
- Once details have been confirmed, a contract will be emailed via DocuSign with details of the private class. A \$25 deposit fee will be due via check or PayPal link at least one week prior to training date.
- The \$25 deposit will be refunded after TA regarding the health & safety topic is concluded.
- ^To facilitate a meaningful training, we request a minimum of 5 participants.

Request Received:
Consultant:

Contract Issued:
Invoice Issued:

Contract/Deposit Received:
Payment Received: