



# TECTA Orientation Enrollment Form

Center Of Excellence for Learning Sciences

## ENROLL TODAY!

Failure to complete all information on this form will result in your application not being processed.

Complete this form and email or fax it to:

TECTA  
1510 Lake Rd  
Dyersburg, TN. 38024

Phone: (731) 288-7477

Fax: (731) 288-7820

email to: lents@dsc.edu

Please Mark the Class You Would Like To Attend

Orient #	Type	Location	Class Format	Start Date
92114	School Age	Online	Online	October 2 (1 module each week)
92115	Center-Based	Gibson Co. - Humboldt	Face-to-face	October 26 (Sat 9am-4pm)
92116	Administrator	Madison Co. - Jackson	Face-to-face	November 19 (Tues. 9 am-4pm)
92117	School Age	Online	Online	January 29 (1 module per week)
92119	Infant/Toddler	Madison Co. - Jackson	Face-to-face	February 1 (Sat. 9am-4pm)
92118	Center-Based	Dyer Co. - Dyersburg	Face-to-face	February 4 (Tues/Thurs.6-9pm)
92120	Family	Tipton Co. - Covington (JNC)	F2F/Zoom	February 8 (Sat. 9am-4pm)
92123	Administrator	Madison Co. - Jackson	Face-to-face	April 1 (Tues. 9am-4pm)
92124	Infant/Toddler	Hardin Co. - Savannah	Face-to-face	April 12 (Sat. 9am-4pm)
92125	Center-Based	Henry Co. - Paris (DSCC)	Face-to-face	May 20 (Tues/Thurs. 6-9pm)
92127	Family	Madison Co. - Jackson	F2F/Zoom	July 22 (Tues/Thurs. 6-9pm)
92126	Infant/Toddler	Obion Co. - Union City	Face-to-face	July 22 (Tues/Thur. 6pm-9pm)
92128	Center-Based	Tipton Co. - Covington (JNC)	Face-to-face	August 5 (Tues/Thurs. 6-9pm)

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Gender  Male  Female

Citizenship:  United States  Other E-mail \_\_\_\_\_ Date Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Ethnicity:  Hispanic  Non -Hispanic

Race:  Asian Pacific Islander  Black  Native American Indian/Alaska Native  Other  
 Two or more races  White

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home County \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Your Place of Employment \_\_\_\_\_ County where you Work \_\_\_\_\_

Work Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Director: Last. \_\_\_\_\_ First \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Agency Type  Center  Dept of Education  Home Visitor  Family  Group Home  
 High School  Higher Education  Registered  Unregulated

I understand that I am enrolling in a 30-hour class and will be responsible for completing the training. I understand that it is my responsibility to let the TECTA office know if I choose to not attend the class. I further acknowledge that I am willing to participate in a professional manner. If at any time my behavior is inappropriate, the trainer has the right to ask me to leave and I will not receive credit for that module. I understand each orientation is designed for a specific age group and I am enrolling in the orientation that will meet the needs of the children I currently work with.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE: If you have changed your name and/or address since you last enrolled in a TECTA-sponsored course, please fill out a TECTA Student Change of Information Form and return it as soon as possible to your local TECTA site.**



The TECTA program is funded through a contract with the Tennessee Department of Human Services and Tennessee State University, Center of Excellence for Learning Sciences.



Revised 12/02/2016