

### 2016-2017 Parent Trust Fund Cycle Start-up Form

Please email completed form to Nicole M. Vitale at [vitale@ctserc.org](mailto:vitale@ctserc.org) **no later than 14 days after the start of each training cycle.**

Name of Organization: SERC Family Center	Training Curriculum Used: PEP (Cycle 1)	Today's Date: 05/22/18
Retreat Date: (If Applicable)	Start Date of Training: 03/21/18	Anticipated End Date: 05/28/18
Name of Coordinator: Sara Wilson	Phone: 860-632-1485	Email: Wilson@ctserc.org
Day of Week the Training Occurs: Wednesday	Time of the Training: 6-8pm	Location of the Training: Community Room
Name of Facilitator: Ashley Smith	Phone: 860-635-5555	Email: smith@ctserc.org
Name of Facilitator:	Phone:	Email:
Number of Parents in attendance at first class: 15	Number of Children Enrolled (CLTI Only):	Number of Children in Childcare: 7
Transportation Provided: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Food Provided: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Child Care Provided: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Please make a note of any special circumstances about the training.		