



# TECTA Orientation Enrollment Form

Center Of Excellence for Learning Sciences

Spring 2024

Complete this form and mail or fax to:

Tennessee Technological University  
TECTA

242 E. 10th Street Foundation Hall, Rr  
Cookeville, TN. 38505

Phone: (931) 372-6561

Fax: (931) 372-6562

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

- 92054 Administrator
- 92048 Center Based (R)
- 92050 Center Based (R)
- 92053 Family Child Care
- 92049 Infant/Toddler
- 92052 Infant/Toddler

- Online Orientation - TTU, Section 02, Putnam
- Motlow Community College, Section H02, Warren
- RSCC-Cumberland County Campus, Section H03, Cumberland
- Motlow Community College, Section H02, Warren
- Motlow Community College, Section H02, Warren
- RSCC-Cumberland County Campus, Section H03, Cumberland

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.**



Revised 12/02/2016

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.



