

6. Attendance at CAA-related State, Regional, or National Association sponsored seminars/training events. (This category is for participation in seminars that were given under the auspices of a CAA-related association. Each seminar or training event must have met for a minimum of 30 minutes to count in this category. The annual Community Action Partnership Convention or Management and Leadership Training Conference are examples of events that fall into this category. *(Note This is not the category for documenting your attendance at CAA association conferences. See # 8–12 for entries in that category.)*

POINTS for this section: Sessions are to be the minimum of 30 minutes, list the sessions and the minutes, total the minutes up and divide by 60 and round down. No fractions of a point will be given. Maximum for this section = 30 pts

Topic of training/seminar: _____
 Sponsoring CAA related association: _____
 Dates attended: _____
 Length of training/seminar in minutes: _____

Topic of training/seminar: _____
 Sponsoring CAA related association: _____
 Dates attended: _____
 Length of training/seminar in minutes: _____

Topic of training/seminar: _____
 Sponsoring CAA related association: _____
 Dates attended: _____
 Length of training/seminar in minutes: _____

Topic of training/seminar: _____
 Sponsoring CAA related association: _____
 Dates attended: _____
 Length of training/seminar in minutes: _____

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 Sponsoring CAA related association: _____
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 Length of training/seminar in minutes: _____

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 Sponsoring CAA related association: _____
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 Length of training/seminar in minutes: _____

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 Length of training/seminar in minutes: _____

Topic of training/seminar: _____
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Dates attended: _____
Length of training/seminar in minutes: _____

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Length of training/seminar in minutes: _____

Topic of training/seminar: _____
Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

Topic of training/seminar: _____
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Length of training/seminar in minutes: _____

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Length of training/seminar in minutes: _____

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Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

Topic of training/seminar: _____
Sponsoring CAA related association: _____
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Length of training/seminar in minutes: _____

Topic of training/seminar: _____
Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

Topic of training/seminar: _____
Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

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Sponsoring CAA related association: _____
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Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

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Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

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Sponsoring CAA related association: _____
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Length of training/seminar in minutes: _____

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Dates attended: _____
Length of training/seminar in minutes: _____

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Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

Topic of training/seminar: _____
Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

Topic of training/seminar: _____
Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in minutes: _____

CHECK HERE IF YOU HAVE ADDITIONAL TRAININGS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

7. **Management related seminars/workshops** sponsored by professional or trade associations, business organizations, government agencies, independent commercial seminar producers (half day = at least three hours). This category refers to management training events that are not specifically focused on fundamentals of Community Action or Not-for-Profit organization management already covered in # 5 above. Also, Do NOT include in this category any seminars you attended that were presented by state, national, or regional CAA associations. See #6 above.)

POINTS for this section: 1 pt per half day (i.e. no less than 3 hrs = half day) to a maximum of 20 pts. No partial pts given

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

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8. Attendance at CAA's State Association Conferences.

(If you attended a seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

NOTE: There is no need to enter more conferences. 5 conferences equals the maximum number of points available

9. Attendance at CAA's Regional Association Conference.
(If you attended a 1½hour or longer seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

NOTE: There is no need to enter more conferences. 5 conferences equals the maximum number of points available

10. Attendance at the Community Action Partnership's National Conference [formerly NACAA]. (If you attended a 1½ hour or longer seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

NOTE: There is no need to enter more conferences. 5 conferences equals the maximum number of points available

11. Attendance at NCAF's Legislative Conference held in the spring each year in Washington, DC. (If you attended a seminar at this conference and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Years of attendance at annual NCAF Legislative Conference

Date 1 _____

Date 2 _____

Date 3 _____

Date 4 _____

Date 5 _____

NOTE: There is no need to enter more conferences. 5 conferences equals the maximum number of points available

12. Attendance at other CAA-related State, Regional, or National Conferences (CAA related = Head Start, Weatherization, CSBG, etc.). (If you attended a seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

NOTE: There is no need to enter more conferences. 5 conferences equals the maximum number of points available

III. INVOLVEMENT IN NATIONAL, REGIONAL, STATE AND LOCAL CAA ACTIVITIES.

1. Instructional presentations to CAA' organizations other than your own. (Minimum of one hour in length.)

POINTS for this section: One point per hour, to a maximum of 5 points per presentation, to a maximum total of 30

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

2. Instructional presentations to non-CAA organizations concerning CAA-related matters (Minimum one hour length.)

POINTS for this section: One point per hour, to a maximum of 5 points per presentation, to a maximum total of 20

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

3. Discussion leader or panelist for a CAA organization other than your own

POINTS for this section: 2 points per event, to a maximum of 20 points.

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

4. Discussion leader or panelist for a non-CAA organization

POINTS for this section: 2 points per event, to a maximum of 20 points.

Sponsoring organization: _____
Subject of presentation; _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation; _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____
Location of presentation: _____

5A. Service in a capacity outside your own CAA (OTHER THAN participation on a Pathways or Excellence Review Team - See 5B and C below. Activities may include 1) provided peer review or evaluation of CAA activities; or 2) explored and developed public policy initiatives relevant to CAAs; or 3) advanced educational or training opportunities for CAA staff. (Use this category if you served on a panel or commission to review the activities of another CAA for the purposes of giving a summary report to the CAA and/or to the agency or organization requiring that review. Other examples would be service on a regional conference planning committee, state Dialogue on Poverty planning groups, Community Action Partnership committees or sub-committees, or ROMA implementation task forces, or similar activities

*POINTS for this section:
Up to 5 points per activity
in section 5A, up to 10
points per review in
sections 5B and 5C, to a
maximum total of 50 points
for all parts of section 5
combined*

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
Type of activity: review group planning group implementation group
 other (specify) _____
Date of delivery of final product or report: _____
Number of hours you participated in this activity: _____

5B Service as Pathways Reviewer for Community Action Partnership (up to 10 points per review - ALL boxes must be checked to qualify for points)

Date of review (Mo and Yr) _____
 I did participate in the Peer Review Consensus Call
 I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

Date of review (Mo and Yr) _____
 I did participate in the Peer Review Consensus Call
 I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

Date of review (Mo and Yr) _____
 I did participate in the Peer Review Consensus Call
 I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

5C Service as Excellence Award Reviewer for Community Action Partnership (up to 10 points per review - ALL boxes must be checked to qualify for points)

Date of review (Mo and Yr) _____
 I did participate in the Peer Review Consensus Call
 I did participate in site visit
 I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

6. Articles published.

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication: _____

Affiliated organization: _____

Title of article: _____

POINTS for this section: Up to 3 points per article; 1 point for each letter to the Editor of a newspaper or other journal; 2 points for each Op/Ed piece; 3 points for published reports and articles published in journals or magazines, etc. to maximum of 15 points.

7. Membership on CAA Board of Directors

Name of Agency: _____

City and State: _____

Dates (month/year) served on this board: _____ through _____

Name of Agency: _____

City and State: _____

Dates (month/year) served on this board: _____ through _____

POINTS for this section: 2 points per conference to a maximum of 10 pts. 5 points for each year served. To maximum of 30 points.

8. Membership on State, Regional, and/or National CAA Association Board of Directors

POINTS for this section: 5 points for each year served To maximum of 50 points

Name of Association: _____

Check whether this is a National , State , Regional

Dates (mo/yr) served on this board _____ through _____

Name of Association: _____

Check whether this is a National , State , Regional

Dates (mo/yr) served on this board _____ through _____

Name of Association: _____

Check whether this is a National , State , Regional

Dates (mo/yr) served on this board _____ through _____

9. Membership on other human service organizations Board of Directors (e.g., United Way, Salvation Army, Social Service Agencies)

POINTS for this section: 2 points per year served, to a maximum of 10 points

Name of Organization: _____

Dates (mo/yr) served on this board _____ through _____

Name of Organization: _____

Dates (mo/yr) served on this board _____ through _____

Name of Organization: _____

Dates (mo/yr) served on this board _____ through _____

Name of Organization: _____

Dates (mo/yr) served on this board _____ through _____

Name of Organization: _____

Dates (mo/yr) served on this board _____ through _____

CHECK HERE IF YOU HAVE ADDITIONAL ITEMS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM FOR SECTION III -- Send that addendum form with this CDF form when you submit your CDF)

IV. INVOLVEMENT IN PUBLISHING AND TRAINING AND IN ASSOCIATION MANAGEMENT ACTIVITIES OUTSIDE OF THE CAA.

<p>1. Instructional materials (such as articles or books) on the organization, operation, or management of CAAs or related human service organizations.</p>	<p><i>POINTS for this section: Up to 5 points per document, to a maximum of 30 points.</i></p>
<p>Type of publication: <input type="checkbox"/>book, <input type="checkbox"/>article,<input type="checkbox"/> manual,<input type="checkbox"/> a/v materials, <input type="checkbox"/>Other Title: _____ Publication or production date: _____</p>	
<p>Type of publication: <input type="checkbox"/>book, <input type="checkbox"/>article,<input type="checkbox"/> manual,<input type="checkbox"/> a/v materials, <input type="checkbox"/>Other Title: _____ Publication or production date: _____</p>	
<p>Type of publication: <input type="checkbox"/>book, <input type="checkbox"/>article,<input type="checkbox"/> manual,<input type="checkbox"/> a/v materials, <input type="checkbox"/>Other Title: _____ Publication or production date: _____</p>	
<p>Type of publication: <input type="checkbox"/>book, <input type="checkbox"/>article,<input type="checkbox"/> manual,<input type="checkbox"/> a/v materials, <input type="checkbox"/>Other Title: _____ Publication or production date: _____</p>	
<p>Type of publication: <input type="checkbox"/>book, <input type="checkbox"/>article,<input type="checkbox"/> manual,<input type="checkbox"/> a/v materials, <input type="checkbox"/>Other Title: _____ Publication or production date: _____</p>	
<p>Type of publication: <input type="checkbox"/>book, <input type="checkbox"/>article,<input type="checkbox"/> manual,<input type="checkbox"/> a/v materials, <input type="checkbox"/>Other Title: _____ Publication or production date: _____</p>	
<p>2. Instructional presentations on CAA management or related topics for organizations other than CAA associations. (Presentations must be for a minimum of ½ hour to receive points in this category.)</p>	<p><i>POINTS for this section: 5 points per presentation, to a maximum of 15 points.</i></p>
<p>Sponsoring org.:: _____ Subject of presentation: _____ Location: _____ Date: _____</p>	
<p>Sponsoring org.:: _____ Subject of presentation: _____ Location: _____ Date: _____</p>	
<p>Sponsoring org.:: _____ Subject of presentation: _____ Location: _____ Date: _____</p>	

3. Involvement in non-CAA-related association management organizations at the local, state, or national level.

POINTS for this section: 1 point per involvement, to a maximum of 5 points.

Name of association or sponsoring organization: _____

Role or activity in that organization: _____

Date of involvement: From _____ to _____

Name of association or sponsoring organization: _____

Role or activity in that organization: _____

Date of involvement: From _____ to _____

Name of association or sponsoring organization: _____

Role or activity in that organization: _____

Date of involvement: From _____ to _____

Name of association or sponsoring organization: _____

Role or activity in that organization: _____

Date of involvement: From _____ to _____

Name of association or sponsoring organization: _____

Role or activity in that organization: _____

Date of involvement: From _____ to _____

By typing my name below, I certify that information contained in this form is true and correct.

Name _____

Date: _____



PROGRAMS APPROVED BY THE CCAP COMMISSION FOR INCLUSION ON CANDIDATE DATA FORM, Section II.4

(Note: Certain of these programs are no longer in operation. Candidates who have completed any these programs in their entirety, however, are still eligible to earn points in section II.4 for the years when the program was in operation.)

1. “EXECUTIVE DEVELOPMENT INSTITUTE”
Offered through auspices of CSBG Program Office, Missouri Department of Social Services’ Division of Family Services.
2. “SEACAA” CERTIFICATION TRAINING
Offered through auspices of Southeast Association of CAAs
3. COMMUNITY ACTION PARTNERSHIP EXECUTIVE TRAINING SERIES*
Offered in three sections (attendance at all three is required)
 - a. “Essentials of Community Action Management”
 - b. “Mobilizing Resources for Community Action Agencies”
 - c. “The Power of Servant Leadership”
4. “NATIONAL COMMUNITY ACTION MANAGEMENT ACADEMY”
Offered at Mid Iowa Community Action, Marshalltown, IA
5. National ROMA Peer to Peer Training (And other ROMA peer training programs that meet the qualifications identified on current CDF form)
6. The Family Development Credential (FDC) based on *Empowerment Skills For Family Course* and led by an official FDC instructor
7. The University of Iowa’s Family Development Specialist Certification Course (FDS)

Only those programs that have been pre-approved by the CCAP Certification Commission may be entered on CDF Section II Education, #4, “Specialized CAA National/State/Regional Executive Training or Certification Programs.” Approval by the Certification Commission requires:

1. Program must be specifically designed to deliver training addressing:
 - a. Community Action Vision and Values
 - b. Management skills
 - c. Leadership skills
2. Program must have a minimum of 30 contact/classroom hours to qualify at the full thirty points.
3. Current program curriculum must be on file with the CCAP Commission.

(CCAP Commission, updated January 8, 2020)