

Appendix C: WIDA Early Years Professional Learning Cohort

Participant Acknowledgement and Agreement

As a participant in the WIDA Early Years Professional Learning Cohort (“Program”) offered by the Pennsylvania Department of Education & Pennsylvania Department of Human Services (“State”) from September 10, 2019 – March 11, 2020;

I, _____ (print full name),

A _____ (position/title)

At _____ (agency/business)

hereby acknowledge and agree to the following:

- I have read and understand the Program Overview.
- The Program has been provided by the State and WIDA solely for the purpose of building State Authorized capacity to deliver professional learning around the *WIDA Early Years Essential Actions* to local early care and education audiences served by me in my current role as listed above.
- The Program requires a minimum time commitment of 70 hours not including travel or lunch hours during workshops.
- I will participate in all Program workshops and online webinars as listed in the calendar provided in the Program Overview.
- I will meet Program deadlines by completing and submitting all required tasks/activities, including delivering professional learning as required in Essential Actions Institute III: Training of Trainers (ToT).
- The WIDA facilitator will keep a record of Program attendance and task/activity completion and will share this information with the State.
- I will notify the State and WIDA facilitator if conflicts arise that will affect my attendance, ability to meet Program deadlines, and/or meet expectations set by the State.

- I will notify the State and WIDA facilitator if I am unable to complete the Program or wish to withdraw. This will mean I will not provide local professional learning around the *WIDA Early Years Essential Actions* and my access to Program participant resources and materials will be revoked.
- By completing the Program requirements, I can use the resources provided by WIDA for creating professional learning materials for my own local offerings.
- I will follow all copyright, trademark and usage guidelines provided/issued by WIDA.
- Completion of the Program does not imply I am *licensed* or *certified* by WIDA as a WIDA Early Years trainer, therefore, I will not make such claims to audiences.
- I will not be authorized to sell, promote, advertise or provide in commerce any WIDA services or any goods or services bearing the WIDA name or logo. All services that I will provide as a State Authorized provider shall be marketed as my own. Except for stating my successful completion of this Program, I shall not promote or imply any connection between WIDA and my provision of services to early care and education programs within State. In no circumstances am I authorized to provide services in connection with the Program outside the state of Pennsylvania.
- The State will share my name, email address, position, and agency with WIDA. WIDA will use my email address to communicate with me about upcoming Program events and updates related to WIDA Early Years.
- WIDA reserves the right to issue a cease and desist if it is determined that I misuse, misrepresent, and/or make false claims about WIDA and/or the WIDA resources provided to me as a participant of the Program.
- I agree to deliver 2 professional development events, FREE of charge to participants, within the first calendar year upon completion of the cohort (March 2020 – March 2021)
- I agree to continue to provide WIDA professional development (can be fee for service) after my commitment of providing 2 free professional development events is executed.
- I agree to advertise my professional development events within the PD Registry with appropriate naming convention “WIDA” for tracking purposes.
- I agree to collaborate with Regional ELRC’s to assure WIDA professional development is provided to early learning providers on an ongoing basis based upon their needs.

Signature

Date

Email (please print clearly)

Sign and return this agreement to EarlyYears@wida.us by August 23, 2019.

Please keep a copy for your records.