



Application for Miller Early Childhood Initiative Workshops

Agency/Organization: _____ Contact Name: _____

Phone Number: _____ E-mail: _____

Address: _____

Total number of children ages 3-5 years: _____

Total number of staff for children ages 3-5 years: _____

1. Please described professional development opportunities that are available through your organization:

2. Please describe your availability to host a workshop:

☐ Days ☐ Nights ☐ Weekends

☐ January-March ☐ April-June ☐ July-September ☐ October-December

3. Would your Agency/Organization be able to subsidize the cost of the workshop? _____

4. Does your Agency/Organization provide programs for parents and families of preschool age children? Please describe:

5. Would you be interested in hosting the parent component workshop of the Miller Initiative? _____

Applications can be mailed to the ADL office at 7851 Mission Center Court, Suite 320 San Diego, CA 92108 or faxed to 619-293-7010. Please allow 1-2 weeks to process this application.