

# THE VITAL EDUCATOR PROGRAM: Training Plan Template

Training Title	Training Description
<i>Insert Text</i>	<i>Insert Text</i>

VITAL Person(s) Responsible	Organization/Affiliation and/or Non-Vital Staff
<i>Insert Text</i>	<i>Insert Text</i>

Training Module(s) Focus (Check all that apply.)	
<input type="checkbox"/>	Module 1: Shifting to Teaching Across Learning Environments (TALE)
<input type="checkbox"/>	Module 2: Culturally Responsive-Sustaining Education Across Learning Environments
<input type="checkbox"/>	Module 3: Meeting the Needs of Students with Disabilities Across Learning Environments
<input type="checkbox"/>	Module 4: Meeting the Needs of English Language Learners Across Learning Environments
<input type="checkbox"/>	Module 5: Family and Community Engagement Across Learning Environments
<input type="checkbox"/>	Module 6: Social-Emotional Learning Across Learning Environments
<input type="checkbox"/>	Module 7: Leading to Support Educators Across Learning Environments

<b>Training WHY and Needs Assessment Data</b>	<i>Insert Text</i>
<b>Training Resources</b>	<i>Insert Text</i>

Training Target Audience (Estimate Total # Served: <i>insert text</i> )				Training Delivery Method		Training Depth	
Part 1 - Participants		Part 2 - Level					
<input type="checkbox"/>	All Educators ( <i># Insert Text</i> )	<input type="checkbox"/>	Statewide	<input type="checkbox"/>	In-Person	<input type="checkbox"/>	Knowledge and Understanding
<input type="checkbox"/>	Administrators ( <i># Insert Text</i> )	<input type="checkbox"/>	Regional	<input type="checkbox"/>	Remote	<input type="checkbox"/>	Skill and Application
<input type="checkbox"/>	Classroom Teachers ( <i># Insert Text</i> )	<input type="checkbox"/>	District	<input type="checkbox"/>	Hybrid	<input type="checkbox"/>	Both
<input type="checkbox"/>	School Counselors ( <i># Insert Text</i> )	<input type="checkbox"/>	School	If Hybrid Specify: <i>Insert Text</i>		<input type="checkbox"/>	Other (Specify): <i>Insert Text</i>
<input type="checkbox"/>	Technology Specialists ( <i># Insert Text</i> )	<input type="checkbox"/>	College or University				
<input type="checkbox"/>	Other (Specify): <i>Insert Text</i>	<input type="checkbox"/>	Other (Specify): <i>Insert Text</i>				

Training Goal	1. <i>Insert Text</i>			
Activities	Timeline	Persons Responsible	Measures	Outcomes
a. <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>
b. <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>
c. <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>
d. <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>
e. <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>	• <i>Insert Text</i>