



TECTA Orientation Enrollment Form

Center Of Excellence for Learning Sciences

Spring 2024

Complete this form and mail or fax to:

Chattanooga State Community College
TECTA

4501 Amnicola Highway
Chattanooga, TN. 37421

Phone: (423) 697-2695
Fax: (423) 697-3208

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

92012 Administrator

92019 Center Based (R)

92021 Center Based (R)

92022 Family Child Care

92020 Infant/Toddler

92013 School-Age Online

92011 TECTA Literacy 30: Books and Be

Online Orientation - CHSCC, Section 01, Hamilton ☐

ChSCC: Main Campus, Section 01, Hamilton ☐

Faith Luthern Child Care, Section 02, Coffee ☐

Online Orientation - CHSCC, Section Online, Hamilton ☐

CISCC: Main Campus, Section 01, Bradley ☐

Chattanooga State Community College - Online, Section 01, Hamilt ☐

Online Orientation - CHSCC, Section Online, Hamilton ☐

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.



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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.



