## Basic Qualified Intellectual Disabilities Professional (QIDP) Training Program Letter of Application: Checklist C

Directions: Please submit this form along with the materials listed below when requesting approval of a QIDP training program developed by your agency. Submit this form and the supporting documentation to:

Department of Human Services
Division of Developmental Disabilities
QIDP Credential Review
319 East Madison, Suite 4J
Springfield, IL 62701

1. Copies of QIDP Job and Education Requirements: Checklist A (IL462-0130) (One for each existing QIDP).
2. Submission statement.
3. Instructor's guide.
4. Handouts.
5. Overheads.
6. Other supplemental training materials.
7. A completed copy of the Basic QIDP Training Course Content Review Guide.
8. ___Sponsor's certificate of approval issued by State Board of Education or the Board of Higher Education (If Applicable).
9. Statement of program rationale.
10. Training Plan.
11. 
12. 
13. 
14. 
15. 

$\qquad$ tools.
15. Performance standard statement.
16. ___Copy of attendance policy.

Course Coordinator $\qquad$
Agency $\qquad$
Address $\qquad$
$\qquad$

I certify that the submitted information is correct.

## Phone \#:

$\qquad$
Fax \#: $\qquad$
E-Mail: $\qquad$
(Signature of Agency Director)
(Date)

