## Modified CE Training Request Form

This form may be used to request a modified or abbreviated Coordinated Entry training process. All staff must complete the Creative Conversation Training but may request to reduce the number of observations or shadow conversations, based on equivalent experience. All requests will be reviewed by a committee of Coordinated Entry Coaches and the County. Completed forms can be submitted to [annemarie.edmunds@piercecountywa.gov](mailto:annemarie.edmunds@piercecountywa.gov).

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| **Staff Name:** | **Agency:** |

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| **Staff Experience (Required)** |
| Please describe any Coordinated Entry experience, including the duration of experience in related activities. Be sure to also include any training received and how this experience will support you as a CE Specialist in Pierce County. |
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| **References (Optional)** |
| If available, please provide either the contact information for or attach a written statement (either on letterhead or via agency email) from a previous Supervisor or Trainer who can speak to your Coordinated Entry experience. This step is optional. |
| **Contact information:** |

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| **Staff Signature** | |
| **The information provided on this form is accurate and complete, to the best of my knowledge.** | |
| **Staff Name:** |  |
| **Staff Signature & Date:** |  |

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| **Request Review – for CE Committee Use ONLY** | |
| **CE Committee Comments:** | |
| **Modified Process Recommendation:** | |
| **Approved by (names/agencies):** |  |
| **Approval Date:** |  |