National Family Development Credential® Program
FDC ™Instructors' Training Institute Application Form

Virtual Instructor Institute via WebEx

February 23-27, 2026

Name:_____FDC Credentialed? Y/N
Please type or print clearly.

Position: _____

Full Organization Name: _____

Organization Address: _____

Town/City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ Fax: (_____) _____

E-mail:_____

Degree_____Institution_____Date completed_____
Educational Requirement: A bachelor's degree is required or a direct oversight by an FDC Instructor with a BA,
FDC Instructor's Name:_____
Private consultants are not eligible without a sponsoring agency/signature.

Application deadline/fees: All Applications with answers should be submitted to nationalfdc@uconn.edu no later than **1/23/26** for consideration. Please also, Cc your signing supervisor when submitting. Once the review process is complete, applicants will be notified via email. Following acceptance, an invoice will be provided for the registration fee ($975) excluding the required 3 books ($170).
Instructor's Institute Application Questions: Please prepare and submit responses with your application to the following three questions: (no longer than 3 pages, double-spaced)

1. Summary of role facilitating or supporting FDC
2. Experience facilitating other interactive trainings, college instruction or professional workshops
3. How do you envision offering the "Empowerment Skills for Workers" series in a manner that complements existing FDC courses in your community?

If more than one person is applying from an organization or coalition, please attach the same answers to question 3, but *all applicants must complete their own responses to questions 1 and 2.*

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Statements of Commitment by Candidate & Supervisor (Required)

Candidate's commitment - If accepted, I will make a commitment to virtually attend all 5 sessions of the FDC Instructor's Training Institute, obtain related publications, prepare a practice activity, and ensure payment of the registration fee.
*Signature*_____ *Date*_____

Supervisor's commitment - I support the candidate's plan to become an FDC Instructor and will work with them to ensure that time is available for this program to be offered, and all related fees are paid.
*Signature*_____ *Print name*_____
Position:_____ Date_____
Email: _____ Phone:_____

*Electronic signatures will be accepted.