

## How to apply for a Training Voucher from MSDE

### 1 Make sure you are eligible!

You need to be part of the Maryland Credentialing program at a **Level 2 or higher** (hint: your certificate of achievement will have at least 2 stars) You are eligible **even if your credential expired between July 1, 2024 and August 30, 2025.**

### 2 Gather the following information:

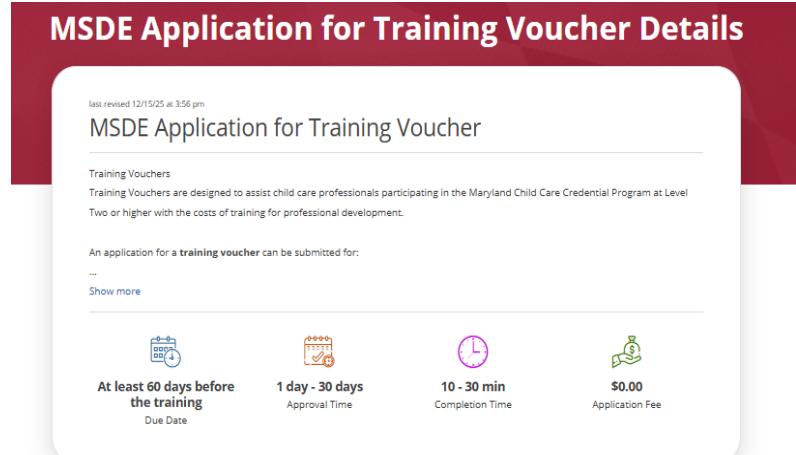
- Social Security Number
- ChildCareEd account email
- CCATs # / Party ID # you can find it at the bottom right of your Certificate of Achievement or at the top right of your Award letter
- Your Center License or Family Child Care License number
- Select the training you want to take (read more in our flyer!)



### 3 Log in or register for an account on [Maryland OneStop](#)



### 4 Scroll down until you see the blue button 'Apply Now'





# Filling out the Training Voucher Application Form



5 Start filling out your information

## Application for Training Voucher

An application for a training voucher shall be accepted only for a pre-service training, a statewide conference, or a national conference. Applicants must hold a current Maryland Child Care Credential of Level Two or higher.

**INSTRUCTIONS:** Complete **all** information in the spaces provided. All applications must be accompanied by required documentation. Incomplete applications **will not** be processed. An application for a training voucher must be submitted not less than 60 days before the date of training.

Full Name

First Name*	Middle Name	Last Name*	Maiden Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Social Security Number \*

<input type="text"/>	<input type="text"/>
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Please enter a valid social security number

CCATS/Party ID# \*

From your certificate of achievement or award letter

Address Line 1*	Address Line 2
<input type="text"/>	<input type="text"/>

City*	State*
<input type="text"/>	<input type="text"/>

Zip Code\*

Daytime Phone*	Alternate Phone
<input type="text"/>	<input type="text"/>

Email Address\*

Use your ChildCareEd account email

6 Complete the remaining **background information** and input your **work information**

Gender\*

- Female
- Male
- Non-binary

Race and Ethnicity\*

- White or Caucasian
- Black or African American
- Hispanic or Latino
- Asian or Asian American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Another race

Age Range\*

- 17-35
- 36-54
- 55 & above

Primary Language\*

Select one:

- I am a Registered Family Child Care Provider in Maryland
- I work in a Licensed Child Care Center in Maryland

Center License #/Family Child Care Registration #\*





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7 Check the 2<sup>nd</sup> option for Pre-Service Training and choose one of the 6 approved training courses

\*All ChildCareEd courses are available in 40+ languages & are ADA-compliant\*

TRAINING INFORMATION (Select one.)

Conference

Pre-Service Training

- [45 hour Growth and Development Birth-age 12 ONLINE](#)
- [45-Hour Infant and Toddler Curriculum](#)
- [45-Hour Preschool Curriculum](#)
- [45-Hour School-Age Curriculum](#)
- [45-Hour Director-Administration ONLINE](#)
- [24 Hour Family Child Care Pre-Service Training](#)

Copy the training title **EXACTLY** as it appears above:

Training Date\*  
MM/DD/YYYY

NOTE: An application for a training voucher must be submitted not less than 60 days before the date of training.

Trainer/Training Organization

Name\*  
H&H ChildCare Training Center / ChildCareEd

Street Address\*  
839 Quince Orchard, Suite D

City\*  
Gaithersburg

State  
Select one... Maryland

Zip Code\*  
20878

Cost\*  
\$399 for 45-hour training OR \$299 for 24-hour training

Please choose an option:\*

Upload a conference/pre-service training advertisement

If you choose this option: [UPLOAD this flyer](#)

Provide a link to conference/pre-service training advertisement

If you choose this option: **copy and paste the link to the training course on ChildCareEd's website (NOT the training title, the link to the class)**

8 Verify, Confirm & Sign! Review all information for accuracy, make sure you understand the terms & conditions and then **type your name in both boxes**. Don't forget to **check the box** before hitting "Submit"

All information on this application is true and accurate to the best of my knowledge. I understand that any false statement on this application will result in it being rejected. I further understand that if I receive a training voucher I will:

- Attend the Conference/Pre-Service training named on the voucher;
- Submit documentation to the Office of successful completion of the training;
- Be required to repay the amount of the voucher if I do not successfully complete the training for which it was issued; and
- No longer be eligible for training vouchers if I do not successfully complete the training for which it was issued.

Signature\*

Text

Draw

Your Name

Your name here

Your name here

I agree to be legally bound by this document.

Date\*

12/29/2025 \*should auto-populate, otherwise put the date

Submit

I've applied – now what???

Keep checking your OneStop account! Once you receive your voucher, **sign & date** it in **blue ink**, **scan & send** it to us at [grants@childcareed.com](mailto:grants@childcareed.com). We will sign the Trainer Terms of Agreement & Authorization, send it back to MSDE & add your training course to your ChildCareEd account. EASY PEASY!