



Regional Center Director / CAPTAIN Cadre Check-In Meetings

Regional Center: _____

CAPTAIN Cadre Member Name: _____

FALL CHECK-IN | DATE:

Please outline the plan for meeting the following CAPTAIN Cadre requirements for the upcoming academic year:

Provide trainings for Regional Center staff, families, and/or providers on Overview of ASD, CAPTAIN and EBPs for ASD (at least 4 per year)

DETAILS: (target audience, date, logistics, etc.):

Participate in regional CAPTAIN collaborative meetings/activities to implement local plans (at least quarterly)

GOALS and DETAILS:

- 1. Dissemination**
- 2. Implementation**
- 3. Collaboration**

SPRING CHECK-IN | DATE:

Did CAPTAIN Cadre member perform all of the duties and requirements for CAPTAIN during this school year?

Attend CAPTAIN Summit

Complete CAPTAIN Cadre Member Survey

Provide Information Sessions on ASD/EBP and CAPTAIN

Attend Quarterly Regional Center ASD Specialist/Cadre Meetings

Attend bi-annual Regional Center ASD Specialist/Cadre Statewide Meetings

Attend Quarterly Regional CAPTAIN Cross Agency Cadre Meetings

Meet With Regional Center Management to Review Training/Coaching Plans and Report on Progress

DISCUSSION

What barriers prevented CAPTAIN Cadre from completing the requirements:

