# North Carolina Division of Child Development and Early Education Credential Application <u>Early Childhood Credential</u> (NCECC), <u>Family Child</u> <u>Care Credential</u> (NCFCCC) and <u>School-Age Child Care Credential</u>

DCDEE Use Only

WFID#

(NCSAC	(NCSACCC) (DCDEE.0168)												
A. APPLICANT INFORMATION - Fill in every blank or write N/A. Please print or type.									): Date	of Birth (mr	n/dd/yy):		
Mr./Ms.	First Name:			MI:	Last	Name:	<b>_</b>						
Maiden Name:					Email Address:								
Home Mailing Address (Include Apt # or lot #, if applicable):					City:				State:	Zip:			
Home Phone	e (include area code):	clude area co	code): County of			of Residen	<b>Ce</b> '						
()	e (melude area code).					or residence:							
<b>B. FACILITY EMPLOYMENT INFORMATION</b> —If you are currently employed in a child care center or family child care home regulated by the Division of Child Development and Early Education (DCDEE) you must provide all of the following:													
Facility ID# (on license): Facility Name:													
Facility Add	ress:				City:				State:	Zip:			
Facility Pho	ne #: Dat	te of employr	ment (at this facili	ity): Date	Employm	ent ended:	# of hours	worked p	er week or	n a regular ba	sis:		
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Current position at this facility (check one): <ul> <li>Director</li> <li>Asst. Director</li> <li>Fasst. Director</li> <li>Family Child Care Home Provider</li> <li>Lead Teacher</li> <li>Teacher</li> <li>Program Coordinator</li> <li>Group Leader</li> <li>Other:</li> <li>Other:</li> <li>Content of the state of the state</li></ul>													
If you were employed in a different DCDEE regulated facility at the time you completed the Credential coursework, you must provide all of the following:       Facility Name:													
Facility ID# (on license): Date of employment (at this facility): Date Employment ended: # of hours worked per week on a regular basis:													
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	C. EDUCATIONAL BACKGROUND—Check all that have been completed. Attach all <u>college</u> level official transcripts. Please check here if the NC Community College is mailing your official transcript separately.												
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This statement must be signed and dated by applicant: I attest to the accuracy of the above information.

### Please read these instructions carefully. (Keep this page for your reference.)

#### Applicant should retain a copy of this form and any attached documentation for his/her records.

**YOU MUST ANSWER ALL QUESTIONS AND COMPLETE ALL SECTIONS OF THIS FORM** to be considered for a credential certificate. Please <u>print clearly in ink or type</u> your answers. If a question does not apply to you, write N/A ("Not Applicable") in the space.

### Section A. Applicant Information:

Complete all requested information in this section. Please include your maiden name (if applicable). Do not abbreviate street names, cities or counties.

Check for accuracy, sign and date your application. Mail completed application with official transcripts. Please allow 8-12 weeks to receive your certificate. **Incomplete forms will be returned and will delay processing.** 

### Section B. Facility Employment Information:

Note: Students completing any credential coursework after 12/31/2008 who are not also on a T.E.A.C.H. scholarship will not receive a bonus award.

## Section C. Educational Background:

**High School Information** (*this is a required field*): Check one. **To qualify for any of the credential certificates, the applicant must have a High School Diploma** (from a regionally accredited high school), **Adult High School Diploma or GED**. High school diplomas do not need to be submitted unless specifically requested by DCDEE. Please know that DCDEE may request proof of high school diploma or GED at anytime.

**College:** Check all that have been completed. <u>Official transcripts must be attached for ALL completed college level</u> <u>coursework, certificates, diplomas and/or degrees</u>. Please <u>do not</u> attach copies of in-service training documentation as these are not considered college coursework. Photocopies of transcripts, student or internet copies, and grade reports are NOT accepted.

\*Accredited is defined as an institution of higher education having nationally recognized regional accreditation by one of the six regional accrediting agencies. (For schools outside the U.S.A., the recognized system of the specified country's accreditation process will be accepted).

### Section D. Course Information:

Successful completion of the credential coursework in regard to the certificate is determined by the NC Division of Child Development and Early Education and is subject to laws, rules and regulations in effect upon completion of individual courses. By signing the application you verify your understanding that approval of your credential certificate is conditional upon, but not limited to, successful completion of the coursework and receipt of a high school diploma or GED.

#### Credential Certificates:

NC Early Childhood Credential (NCECC) = EDU 111 and EDU 112 <u>OR</u> EDU 119 NC Family Child Care Credential (NCFCCC) = EDU 111 and EDU 113 <u>OR</u> EDU 119 and EDU 113 <u>OR</u> EDU 114 NC School-Age Child Care Credential (NCSACCC) = EDU 145 and EDU 235 <u>OR</u> EDU 145 and EDU 263

#### Credential Course Names:

**EDU 111**—Early Childhood Credential I, **EDU 112**—Early Childhood Credential II, **EDU 113**—Family Early Child Credential, **EDU 114** – Introduction to Family Childcare, **EDU 119**—Introduction to Early Childhood Education, **EDU 145**—Child Development II, **EDU 235**—School-Age Development & Program, **EDU 263**—Development of School-Age Program

- 1. Instructor's Name or Signature: Provide name of course instructor. *If a course was completed before March 1, 2001*, the actual instructor or Early Childhood Department Chair must sign this form and fill in the appropriate boxes.
- 2. Name of NC Community College Where Coursework Completed: Provide name of NC Community College where you enrolled in the course, not name of facility or building where course was held.
- 3. Date of Enrollment: Provide date of first class you attended for this course. Example: 01/15/02 NOT Spring 2002
- 4. Date Completed Course: Provide date of last class you attended for this course. Example: 12/15/02 NOT Fall 2002
- 5. # of Hrs. Absent: *If you completed the course before July 1, 1999,* the number of hours missed must be provided by the instructor or department chair.
- 6. Grade: Attach official NC Community College transcripts to the form to verify course grades.

#### NOTE:

- To qualify for the NCFCCC, you must have completed EDU 114 after August, 2009.
- To qualify for the NCSACCC, you must have completed EDU 145 and EDU 235 or EDU 263 after March, 1999.
- All courses (EDU 111, EDU 112, EDU 119, EDU 113, EDU 114, EDU 145, EDU 235, and/or EDU 263) must be completed at a NC Community College with a grade of C or better to qualify for a credential certificate.
- Grade PE (Credit Received), CE (Credit by Exam) or EL (Experiential Learning) disqualifies you from receiving the credential certificate.

Mail to:	Questions?	Website:
Division of Child Development and Early Education	Call the Workforce Education Unit	www.ncchildcare.net
Workforce Education Unit	919-662-4567 or 1-800-859-0829	
2201 Mail Service Center		
Raleigh, NC 27699-2201		