

Building a Business: Certified Family Child Care Management Training - Participant Application - Cohort 8 - 2017

APPLICANTS: We are seeking a diverse group of participants with a range of experience and education. Training will be conducted in English and textbooks are in English, but we will have support for Spanish speakers with a Spanish speaking coach and supplemental materials in Medford. Minimum qualifications are: 1) Certified Family Child Care owner/operator or staff or Registered Family Child Care Provider who wants to become Certified, 2) Step 3 or higher on the Oregon Registry, and 3) commitment to attend all sessions (barring illness, emergency or unforeseen circumstances) which will be delivered in one or two full day Saturdays per month over 8 months (September -April). **This application must be completed entirely. Please remember to print clearly and to sign your commitment on the last page.**

Full Name	Primary Phone <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
Mailing Address	City
State	Zip
Alternate Phone: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work	email

Current position: _____ How long in this position? _____
 (position and name of your program)

Previous position: _____ How long in this position? _____
 (and name of the program/employer)

This is a ☐ Registered or ☐ Certified Family Child Care with CCD Number: _____ located in
 county _____ (please specify).

My program serves the following number of children in each age group:

_____ 6wk- 36 months _____ ages 3-5 Preschoolers _____ Kindergarten and Up

I care for number of children: _____ have an IFSP/IEP _____ are English Language Learners _____ are on ERDC/JOBS

I participate in the USDA Food Program: ☐ yes ☐ no

QRIS: ☐ attended an Increasing Quality Training ☐ Have made Commitment to Quality ☐ have a Star Rating at _____
☐ in a Focused Network ☐ not yet Other: _____

Please rate your **experience with technology**: (check where you feel you are most comfortable)

None – no computer access	Basic - Can check email	Moderate - Use on-line sites such as facebook, google groups, a webinar	Higher level- can set up and moderate facebook, google group or similar	Advanced – Skype, on-line learning, etc.

Educational Background: What is your Step on the Oregon Registry? _____.

High School diploma or GED: ☐ yes ☐ no If no, highest grade completed 10 11 12

College _____ years. Graduate School _____ years. If you received a degree or certificate indicate below

Name of School	Location	Diploma or Degree	Major
College or University _____	_____	_____	_____
Graduate School _____	_____	_____	_____
Vocational or Other Training (CDA) _____	_____	_____	_____

Would you be interested in taking this training for college credit if it were available for an extra fee? ☐ yes ☐ no
If yes, do you prefer: ☐ Community College credit (\$23) ☐ Undergraduate credit (\$360) ☐ Graduate credit \$360

Essays: Please include with your application one or two pages with your replies to the two following questions: **Why are you interested in this program?** (100 to 200 words)
What skills would you bring to the group for this program? (100 to 200 words)

References: You must submit one letter or email of support from a mentor, advisor or parent. The letter should support your participation in the program. The letter should include contact information for follow-up if needed. Direct emails to merrily@oregonaeyc.org.

Statement of commitment: *I have reviewed the training dates and times. I understand that if I am accepted into the Building a Business Training, I will be expected to complete the entire series of classes and seminars. This includes attending each training session and being fully involved in all group assignments and discussions. I agree to have at least one home visit from my Coordinator/Coach and to complete the Outcomes in the Business Plan to the best of my ability.*

I commit to complete the full program; however I have a conflict on the following date(s) that cannot be changed: _____

I want to attend the training in ☐ Portland ☐ Medford

Signed

Date

Costs: Each accepted participant is expected to make a payment of \$200 toward the training fee. This amount is not covered by either scholarship program. Time payments may be arranged at no interest. Applications for the *Cohort Scholarship* should be completed with the Oregon Center for Career Development for the 2017-2018 year. Award of scholarship does not guarantee a space in the BAB Cohort: Select the application based on your current Registry Step
English: <http://www.pdx.edu/occd/oregon-statewide-scholarship-program-0>
Spanish: <http://www.pdx.edu/occd/programa-estatal-de-becas-de-oregon>
Commitment forms for the scholarship funds provided by AFSCME and the Office of Child Care will be completed at Orientation. All materials including textbooks, snacks and Saturday lunch, trainers, coordination, and coaching are provided. For those who travel over 50 miles one way to the training a small mileage stipend and those who travel over 100 miles both a mileage stipend and lodging (double occupancy) will be provided if requested. Single occupancy is available for an extra fee of \$50 each time.

Applications including statement page and supporting letter must be received by **Friday, September 1st**. Applicants will be notified by September 8. Please mail, email or fax applications to:

OAEYC – BAB Training
PO Box 60
Gladstone OR 97027

FAX applications and letters to: **503-496-0520** or email applications to: merrily@oregonaeyc.org
If questions on the application process, contact: Merrily Haas at 503-496-3991 or 1-800-452-3610