Phyllis Jack Moore CDA Class Scholarship Application



\$250 Scholarship

Eligibility Requirements:

- Can be employed in any county in Texas.
- Must be 18 years of age or older.
- Must hold a high school diploma or equivalent.
- Written & oral English proficiency required.
- Must be a full-time (at least 35 hours per week) teacher working in the classroom in a child care center with infant, toddler, or preschool age children or a family child care home provider.

Scholarship Benefit:

This Scholarship is for <u>\$250</u> towards class fee. If awarded & accepted, recipient must pay the remaining \$325 fee before class ends.

The second part of the CDA process is to obtain and submit personal funding for the Application Fee (\$425) paid directly to the Council of Professional Recognition. I understand that I am responsible for paying the Council of Professional Recognition \$425 for the Application Fee within six months of completing the course work. I will circle Yes - YES NO

(Some scholarships may be available for the Application Fee but are not guaranteed. A small financial commitment may be required of the child care facility for any Application Fee scholarships that become available.)

Instructions:

- 1. Complete all portions of the CDA Class Scholarship Application
- 2. The director and applicant must print and sign their names at the bottom of the application
- 3. Applications must be <u>received</u> by 5:00 p.m. February 10, 2023. Award recipients will be notified by February 17. For questions, please contact Debra Hanus at 817.831.2111, ext. 145 or <u>Debra@CampFireFW.org</u>.
- 4. Applications may be submitted by email to Training@CampFireFW.org; Fax to 817.806.5150 or mail to:

Camp Fire First Texas, ATTN: CDA Scholarship, Debra Hanus, 2700 Meacham Blvd., Fort Worth, TX 76137

APPLICANT CONTAC	T INFORMATION:		
		Date	
Name (as stated in Driver's license):			
Home Address:		City/State/Zip:	
Home Phone	Daytime Phone:	Cell Phone:	
Email:			

CURRENT EMPLOYMENT INFORMATION: Program Name: _____ Phone Number: ____ Address: _____ City/State/Zip: _____ Immediate Supervisor: ______ Title: _____ Date Hired: _____ Your Current Title/Position: _____ CCMS program ID number_____ How many current CCMS children are enrolled in the facility? Is your facility enrolled in the Texas Rising Star program? _____ What level is the facility listed as a Texas Rising Star program? **APPLICANT QUESTIONS:** 1. How many years have you been an early childhood teacher? ______years What age ranges of children have you taught? List the names of other child care programs you have worked for and the dates of employment. (If more space is needed, please attach another page with additional employment information.) Program Name: Start date: End date: 2. Why do you want to earn a CDA Credential? (You may attach additional pages if needed)

3. In your career as an early childhood educator, how have you demonstrated passion, dedication, and hard work?

4. How will the children in your program	m benefit from you receiving this scholarship?
5. What is your highest level of Education	on?
☐ High School Diploma/GED	☐ Associates Degree in:
☐ Some college courses taken	☐ Bachelor's Degree in:
6. On average, how many clock hours of	f training do you earn each year? (Check the appropriate box)
□ 24 hrs training/yr. □ 25-30 hrs train	ning/yr □ 31+ hrs training/yr
Where did you receive training last year? Wh	ho provided the training?
, e ,	•
CDA Cradential Desirada de alcono. Info	The distance of the property o
CDA Credential Desired: check one- ☐ Infar	nt/Toddler □ Preschool □ Family Home
7. List any special training, skills, hobbic	es, or interests you feel help qualify you for this scholarship:

<u>Additional Information about the CDA Class Scholarship</u>: Applicant and director, please review the following information and sign below to acknowledge understanding and agreement with the scholarship requirements, should the applicant be awarded this scholarship.

Scholarship is for partial cost of tuition, in the amount of \$250, to attend classes and complete weekly homework assignments required for the 120 clock hours of training offered by Camp Fire First Texas. The recipient must pay the remaining \$325 fee before class ends.

The scholarship also does **NOT** cover the required additional Application Fee of \$425 payable to the Council for Professional Recognition. NOTE: Some scholarships may be available for the Application Fee and may require a small financial commitment from the child care facility.

The CDA class runs February 27, 2023 -July 31, 2023 for a total of 20 class sessions. Classes will be held on Mondays from 6:30-9:30 pm via ZOOM. This scholarship requires the participant to attend weekly classes and complete weekly homework assignments in Google Classroom.

Regular attendance is required. <u>More than 2 absences may result in the candidate being dropped from the class.</u> If the recipient should drop from the class for any reason, the program director of the center/or family home is responsible for re-payment of the cost of tuition, and any other expenses incurred.

I have read and understand the above statement and understand the scholarship requirements. I agree to abide by these guidelines if awarded the CDA Scholarship.		
Director Print Name	Director Signature	Date
Applicant Print Name	Applicant Signature	Date

REFERENCES:

Please use the attached Professional Reference Forms to provide at least <u>two (2) professional references</u> who are not related to you. Professional references may include: current or previous employers, coworkers, or anyone who is familiar with your work performance and professional conduct.

CDA Class Scholarship Application Professional Reference Form

This Professional Reference Form is to be completed by someone who is not related to the candidate and is familiar with the candidate's work performance and professional conduct. Please complete the form entirely, including your name, signature, and date. Thank you for taking the time to complete this reference. (Additional comments may be written on the back.)

1		J	,
Scholarship Applica	ınt's Name:		
Your Name:		Occupation:	
How do you know	he scholarship applica	nt?	
Please answer the f	ollowing questions. Be	as specific as possible, provid	ing examples if appropriate:
1. How would you	describe the applicant's	communication skills?	
C		t has in working with young chi	
		passion, dedication, and hard w	
4. In what areas do	es the applicant need m	ore experience or training in de	aling with children, families or
		ate the candidate in these areas	
Performance Area:	Example:	Score (5.4.3.2.or)	(4) Very Good Performance

Learning New Skills Accepts new information and implements it into the classroom, shares new information with others Initiative (5,4,3,2,or 1) (5,4,3,2,or 1) Takes responsibility, makes suggestions for

improvements, will get a job done (even if it's not part of their job duties)

Accountability

Meets deadlines, available when needed, assists others in also meeting deadlines, does not abuse break times, absences from work are minimal

(°) = ·····
(4) Very Good Performance
(3) Good, Solid Performance
(2) Performance Needs
Improvement

(1) Unacceptable Performance

Your Signature:	Date:

CDA Class Scholarship Application Professional Reference Form

This Professional Reference Form is to be completed by someone who is not related to the candidate and is familiar with the candidate's work performance and professional conduct. Please complete the form entirely, including your name, signature, and date. Thank you for taking the time to complete this reference. (Additional comments may be written on the back.)

Scholarship Applican	t's Name:			
Your Name:	ur Name:Occupation:			
How do you know th	e scholarship applicant?			
How long have you k	nown the applicant?			
	lowing questions. Be as specific a			
2. What strengths do	you feel the applicant has in worki	ing with young childre	n?	
	the applicant need more experience			
Using this 5-point sca	ale, how would you rate the candi	date in these areas:	(5) F IP (
Performance Area:	Example:	Score	(5) Exceptional Performance	

Performance Area:	Example:	Score
		(5,4,3,2,or 1)
Learning New Skills	Accepts new information and implements it into	
	the classroom, shares new information with	
	others	
Initiative	Takes responsibility, makes suggestions for	
	improvements, will get a job done (even if it's not	
	part of their job duties)	
Accountability	Meets deadlines, available when needed, assists	
	others in also meeting deadlines, does not abuse	
	break times, absences from work are minimal	

(4)	Very Good Performance
(3)	Good, Solid Performance
(2)	Performance Needs

(1) Unacceptable Performance

Improvement

Your Signature: _	Date:	

Class requirements-

To participate in the CDA class you need to join ZOOM on a computer with a working camera and microphone. Your camera needs to be on during the entire class so that we can see your entire face. You need your sound accessible for each class too Participation in class is required Find a quiet place to join the LIVE class. You CANNOT be driving, cooking, caring for children, etc. during class Make sure you can leave your job in time to arrive home before class starts. You cannot be driving while attending the class Each class also has homework that is due the next week before class starts I am aware of the above and agree to follow these requirements for each CDA class. Print name Signature Date

Applicant Demographic Data

Scholarships are provided primarily through grant funding and funders often require information about our participants. Will you please provide us with some information about yourself so that we can continue to offer scholarships for our programs? Your cooperation is appreciated by Camp Fire.

1.	What is your gender?	6. What was the highest level of education you acquired? (Please √ check all that apply.)
	☐ Male	1,7,0
	☐ Female	High School Diploma or GED equivalent
	☐ Non-binary	☐ Some College
2	W	College Degree
2.	What is your age?	Associate's (Major)
	18 to 20	Bachelor's (Major)
	21 to 29	Master's (Major)
	☐ 30 to 39	7. If you receive a salary, how much do you earn
	40 to 49	annually from child care alone before taxes?
	50 to 59	Not applicable, I receive an hourly wage.
	60 years or over	Go to question #8
		☐ Below \$17,000
3.	What do you consider your race/ethnicity?	\$17,001 - \$35,000
	(Response is optional. Funders often request this	\$35,001-\$50,000
	data.)	\$50,001 - \$75,000
	☐ African-American	\$75,001 - \$100,000
	Asian/ Pacific Islander	8. If you receive an hourly wage, how much do you
	Hispanic or Latino(a)	earn per hour from <u>child care alone</u> before taxes?
	☐ White/Hispanic	Not applicable, I receive a salary; see response in
	☐ Black/Hispanic	question #7.
	☐ Native American or Alaska Native	\$7 to \$9.99
	Caucasian	\$10 to \$12.99
	☐ Multi-racial	\$13 or more an hour
	☐ Other	□ \$13 or more an nour
4	VAIL of the same MAIN and the same	9. How many years have you worked in child care?
4.	What is your MAIN position?	Less than 1 Year
	Family child care provider	☐ 1-3 Years
	Classroom Teacher	4-6 Years
	Assistant Director	☐ 7-10 Years
	☐ Director	Over 10 Years
	Owner	
	☐ Owner/Director	10. How did you hear about the CDA program?
	Other	Friend
		☐ Coworker
5.	What are the Professional Credentials that you	☐ Internet search
	have acquired? (Please circle) all that apply.)	☐ Employer
	Child Development Associate Credential	Camp Fire employee
	National Administrator Credential ECMI - Administrator's Credential	Camp Fire E-newsletter
	Other:	Licensing
	- Catol	Other