



THE VERMONT CHILD CARE INDUSTRY AND CAREERS COUNCIL

In partnership with the Community College of Vermont
Spring 2019 Course Announcement and Application to Enroll

EARLY CHILDHOOD EDUCATION & AFTERSCHOOL PROGRAM MANAGEMENT (EDU 2042)

CCV in Bennington: Tuesdays 6-9pm January 22 – April 30, 2019 Instructor: Alyson Gryzb

CCV in Winooski: Wednesdays, 6-9pm January 23 – May 1, 2019 Instructor: TBA

Limited Space

The course is designed to provide an overview of the role and responsibilities of the early childhood and/or afterschool program administrator. Topics will include philosophy and design, personnel and resource management, and legal and financial considerations. Students will develop skills and identify resources to better prepare themselves for meeting the challenges faced by early childhood administrators.

The Winooski course is funded through the State of Vermont Agency of Human Services, Department for Children and Families, Child Development Division.

The Bennington course is partially supported by The Vermont Department of Labor's Workforce Education and Training Fund.

We are grateful for the funding to support professional development for Vermont's child care workforce.

Contact the VT Child Care Industry and Careers Council at (802) 985-2700 with questions.

APPLICATION DEADLINES

Apprentices: December 21, 2018

Community Members: January 4, 2019

WHO IS ELIGIBLE TO APPLY?

These college courses are primarily for those enrolled in the Registered Child Care Apprenticeship Program (with VCCICC and the Department of Labor). After apprentices are enrolled, VCCICC opens the courses to community members who are working in regulated child care, as space allows. All applicants must currently be working with children in VT (or be a VT resident working with children in a neighboring state).

- Staff and management working in licensed child care programs
- Family child care providers
- School-age care providers / Afterschool staff
- Others currently working with young children

HOW TO APPLY

STEP 1: Become a CCV student

If you have never taken classes at CCV (or another VT state college), or if it has been more than 3 semesters since your last course, go to www.ccv.edu/apply/ to complete and electronically submit your CCV Admission Form. You should receive an email from CCV confirming that you are now a student. Please continue to follow the steps below to register for this course through VCCICC.

STEP 2: Contact a CCV Academic Coordinator

Wait 24 hours for your admission form to be uploaded to the CCV system, then contact an Academic Coordinator at CCV. If you are already a CCV degree student, contact your Coordinator to discuss your plan to take this course. Your CCV Coordinator will NOT be able to register you directly for this class and you cannot register for this class online. VCCICC contracts these courses; you need to follow the steps outlined in this packet to register.

Note: If you have a previous unpaid balance at CCV or another Vermont state college, you will need to resolve this with the Business Office before you will be allowed to register for class.

If you do not already have an advisor at CCV, please ask to speak to the following Coordinator in your region:

CCV Bennington	Jeannie Jenkins	802-447-2361
CCV Winooski	Samantha Boymer	802-654-0525

Questions to ask the CCV Coordinator:

1. Confirm that your student information is in the CCV system.
2. Ask if you need to take the **Accuplacer** assessment, and if so, schedule an appointment to do this at CCV as soon as possible. It can be done at any CCV location convenient to you, even if it's not where you'll be attending class.
3. Ask if you are prepared, as far as CCV is concerned, to register for the class through VCCICC.

Write the name of the CCV Coordinator you speak with in the space provided on page 5 of this application packet.

STEP 3: Complete pages 5, 6, 7, 8 (and 9 for new or renewing membership) of this application packet. Double check your application for accuracy using the checklist on page 4. Incomplete applications (missing info, payment, etc.) will not be processed until all requirements are met. We cannot reserve a seat in class until applications are complete, including payment.

STEP 4: Submit your complete application with appropriate fees to VCCICC. See textbox below for options.

STEP 5: After the application deadline, VCCICC will notify you by email if you get a spot in class or if you are on the waitlist. If you get a spot in class, go to www.ccv.edu and click the **portal** tab. If this is your first semester at CCV, click on **New users: Activate your account here**. Get familiar with your student portal. We highly recommend signing up for a free Moodle Basics Workshop at CCV – even if your class is not online, you will still need to access CCV's online learning system; ask your CCV Coordinator about options.

STEP 6: Community members only, if you get a spot in class, you will need to acquire the textbooks for your course. The titles and ISBN# will be provided to you at this time.

NOTE: All participants in any Vermont Child Care Industry and Careers Council course are also students of CCV and subject to CCV policies.

APPRENTICE students only:

- Submit pages 5, 6, 7 and 8 of this packet to VCCICC as soon as possible, no later than **December 21**
- If you need to renew your annual VCCICC membership, fill out page 9 and submit \$30
- You do not need to enclose any fees for the course application
- You will receive your textbooks on or before the first night of class

NON-APPRENTICE students only (anyone working in the field, but not currently enrolled in the Registered Child Care Apprenticeship Program):

- Apply early for your best chance of getting a spot in the class you want. The deadline is **January 4**.
- Submit pages 5, 6, 7, and 8 and pay the application fee (see options below). Applications without full payment will not be processed until payment is received. We cannot reserve your spot without payment.
- If you'd like to become a VCCICC member, fill out page 9. Your membership will be included in the application fee.
- If a space is unavailable or if you withdraw at least 48 hours before classes start, we will return your check or money order; or if you use PayPal, we will send you a refund check, minus the convenience fee.
- Note: VCCICC does not cash checks until 48 hours before class starts.

Application submission and payment options:

Option 1: Mail your application along with a check or money order, payable to *VCCICC*, to the address on page 4 by the deadline. (\$75 for current members; \$105 for non-members)

Option 2: Scan and email (vccicc@comcast.net) OR fax (802-497-3030) your application and use PayPal (on our Donation page) to pay your application fee.
<http://www.vtchildcareindustry.org/donate.html>

Please be advised: **PayPal** charges a **convenience fee**. If you use this method of payment, for current members the cost is **\$77**; if you are not a current member, the cost is **\$108**. Save your confirmation/receipt emails from PayPal for reference. If you use PayPal and do not get a spot in class or if you withdraw at least 48 hours before class starts, you will receive a refund check from VCCICC, minus the convenience fee.

Option 3: If you're in the area, you're welcome to call VCCICC to arrange a time to drop off your application with cash, check or money order to our office in Shelburne.

APPLICATION DEADLINES

Apprentices: December 21, 2018
Community Members: January 4, 2019

PLEASE REVIEW THE APPLICATION CHECKLIST ON PAGE 4 BEFORE MAILING!

Before you send in your application packet, make sure it includes the following:

- Page 5. VCCICC Application to Enroll, including name of CCV Coordinator**
- Page 6. Course Agreement signature and Permission to Share Information**
- Page 7. CCV Contracted Course Registration Form**
- Page 8. CCV Authorization for Release of Information**
- Page 9. VCCICC Membership Form**
If you plan to take more than one VCCICC sponsored course within a year, becoming a member will save you money. Plus, you will enjoy the other benefits of membership, including access to free or reduced-cost trainings throughout the year.
- Application fee.** See textbox on page 3 for payment options.
By check or money order: \$105.00 for non-members, or \$75.00 for VCCICC members*
By credit card through PayPal: \$108.00 for non-members, or \$77 for VCCICC members* (includes convenience fee)

*If you are unsure if you are a current VCCICC member, please contact us.

This fee is waived for those registered in a training program through the VT Department of Labor / VT Child Care Industry and Careers Council.

- If you get a space in class, you will receive a confirmation email from VCCICC. If you are a community member (not a registered apprentice with the Dept. of Labor) you must purchase the textbooks for your course. Please wait to purchase your books until after you receive confirmation that you have a spot. Textbook information is listed on page 10.

Mail application packet and check or money order, payable to *VCCICC*, to:

VCCICC
145 Pine Haven Shores Rd., Suite 1137
Shelburne, VT 05482

Contact us: 802-985-2700 or vccicc@comcast.net

Creating access to higher education for Vermont's child care professionals
www.vtchildcareindustry.org



Vermont Child Care Industry and Careers Council, Inc.
APPLICATION TO ENROLL

Name: _____ (please print clearly)

Name of program where you work: _____

Work phone: _____

1) Please check all that apply. This program is a(n):

- Registered Family Child Care Provider
- Licensed Child Care Program
- Agency of Education Setting
- Participant in the VT STep Ahead Recognition System (STARS)
- Accredited Program
- Head Start Program
- Other:

2) I am taking this class:

- As a Child Care Apprentice
- To achieve or renew my CDA credential
- As a TEACH scholarship recipient
- To earn my Program Director Credential
- To earn my Associate's Degree
- Other: _____

3) Length of time employed in the field (caring for children and youth): Years_____ Months_____

4) Number of hours per week you work with children:_____

5) Number of children directly in your care:_____

6) Check the course you are requesting:

- Early Childhood Education & Afterschool Program Management, **Bennington**
- Early Childhood Education & Afterschool Program Management, **Winooski**

7) All new students must include the following information (see page 2 for more info):

**I have spoken to _____ and I have been approved as a
CCV student. *Name of CCV Academic Coordinator***



COURSE AGREEMENT

If enrolled into this course I will make every effort to attend all classes and complete assignments. If I need to drop or withdraw from the course, I understand it is my responsibility to notify VCCICC and follow CCV's official policy to drop a course.

I understand that state, federal and private funds are being used to fund this course. I agree to share pertinent information for VCCICC's data collection needs, including how this course may impact my income and work as a child care provider. This information will be used for grant writing and reporting.

Signature: _____ **Date:** _____

Social Security Number: _____ - _____ - _____

PERMISSION TO SHARE INFORMATION

VCCICC is part of the larger professional development system in Vermont and we coordinate our efforts with others who are also working to benefit the child care workforce.

With that in mind, we are asking permission to share your participation and/or successful completion in the college courses that are offered to benefit the Child Care Apprenticeship Program with organizations that are providing similar support.

These currently include T.E.A.C.H. Early Childhood® VERMONT (a program of the Vermont Association for the Education of Young Children) and the Child Development Division (College Tuition Grants).

By signing below I give my permission for VCCICC to share my participation and/or successful completion in the college courses that are offered to benefit the Child Care Apprenticeship Program with organizations who are providing similar support.

Signature: _____

Printed Name: _____



Contracted Course Registration Form

Name _____
First Middle Last

Mailing Address _____ City _____

State _____ Zip _____

Telephone: *Home* _____

Work _____

Cell _____

E-mail address _____

Student ID Number or Social Security Number _____

If you are a new CCV student or have not attended CCV for more than one year, please fill out our admission form at: www.ccv.edu. New students should also contact a CCV Coordinator for additional admission requirements.

Emergency Contact: _____

Course:

- Early Childhood Education & Afterschool Program Management (EDU 2042)

This is a CCV course contracted through VT Child Care Industry and Careers Council, Inc. Students must meet CCV admission requirements to be eligible to take the course.

I wish to be enrolled in the course/s listed above. If I wish to withdraw from a course at any time, I must contact CCV and follow the official drop/add policy listed in the CCV Student Handbook. Failure to notify CCV may result in an "F" for the course. I understand that I may access the Student Handbook at: <http://www.ccv.edu/files/pdfs/StudentHandbook.pdf>.

Student signature _____ **Date** _____



AUTHORIZATION FOR RELEASE OF INFORMATION TO A SCHOOL OR AGENCY

In accordance with the Family Rights and Privacy Act of 1974, as amended, this form constitutes written consent from the student to disclose personally identifiable information from his/her education record to the party listed below for the purposes specified. The receiving party is cautioned that this information may not be released to any other parties without additional written consent of the student.

STUDENT INFORMATION

Student's Full Legal Name - Please Print Student ID # or last 4 digits of Social Security #

I hereby grant permission to the Community College of Vermont to release information about my attendance, grades, performance, and business office account to the school or agency listed below. The purpose of this release of information is to keep the school or agency informed about my educational progress during the time that I am a student at the school or a participant in a program of the agency.

VT Child Care Industry and Careers Council Full Name of School or Agency

145 Pine Haven Shores Rd, Suite 1137 Complete Address of School or Agency

Shelburne VT 05482 City State Zip

This authorization will remain in effect while I am a student or participant at the school or agency listed above or until I inform CCV in writing that I am terminating the authorization.

Student's Signature Date

To authorize release of information to more than one school or agency, you must submit a separate form for each school or agency.

For Office Use Only: Rec'd by: Date: Proc by: Date:



Vermont Child Care Industry and Careers Council
 145 Pine Haven Shores Road, Suite 1137
 Shelburne, VT 05482
 (802) 985-2700
 vccicc@comcast.net
 www.vtchildcareindustry.org

MEMBERSHIP FORM

The Vermont Child Care Industry and Careers Council works to enhance the knowledge, skills and status of child care providers by offering the Apprenticeship Program and other professional development activities, while coordinating and linking with other leaders and organizations, in order to build quality and sustain growth of the child care industry.

VCCICC's mission is to support Vermont's children, families, communities, schools and businesses through the recruitment, development, mentoring and retention of qualified child care professionals.

Your VCCICC membership dues stay local and support professional development for child care employees in Vermont. Your membership is valid for one year, starting from the date you join. You will receive a renewal notice in the mail prior to your membership's expiration.

Please consider giving above and beyond your membership! Your gift may be tax deductible.

-----✂-----✂-----Please detach and return the portion below with your \$30.00 membership fee-----✂-----✂-----

VCCICC Membership Form			
For VCCICC use only: Check #:		_____	Exp: _____
Name: _____			
Mailing Address: _____			
Town: _____	County: _____	State: _____	Zip: _____
Home phone: _____		Cell phone: _____	
Email: _____		Today's Date: _____	
Employer: _____		Work Phone: _____	
<input type="checkbox"/> \$30 Membership Fee Included		<input type="checkbox"/> Additional Donation Included \$ _____	
Check the box that best describes your role with VCCICC:			
<input type="checkbox"/> Apprentice	<input type="checkbox"/> Community Member	<input type="checkbox"/> Mentor	<input type="checkbox"/> Sponsor
<input type="checkbox"/> Registered Home Provider	<input type="checkbox"/> Licensed Center Staff	<input type="checkbox"/> Board Member	<input type="checkbox"/> Other