

Achieved Credential Or Degree Bonus Grant Application

Child Development Division (CDD)
Department for Children and Families (DCF)
Vermont Agency of Human Services (AHS)

For State Use Only	
Date Received: _____	Invoice #: _____
Reviewed/approved: _____	Date: _____
Payment entered by: _____	Date: _____
License check: _____	
Application #: _____	Agreement # _____
<u>Program Manager Approval/Denial:</u>	
_____ Approved: \$ _____	_____ Denied
_____	Date: _____
(Signature) _____	

This application is for a bonus up to \$1000 for Vermont residents who have achieved specific credentials or degrees. These grants are awarded to registrants or to staff of licensed programs only when the program in which they work is in good regulatory standing with the CDD. Good regulatory standing means that any regulatory violations have been corrected,

no "Parental Notification Letter/s" have been mailed within a year of the application and the program has not demonstrated a pattern of repeated regulatory violations in the year prior to the application. The CDD may, upon request in an individual case, grant a waiver from this grant policy. A waiver may be requested by completing and signing the

"alternative certification" at the end of this application.

Contact Person
Linda Clark
802-241-1215 or
1-800-649-2642 ext. 1215
linda.clark@ahs.state.vt.us

Application Deadline
First day of the month

Name (Print) _____ Birth Date _____ Social Security # _____
Address _____ City _____ State _____ Zip _____
Telephone (Home) _____ (Work) _____ Email _____

1) Check the appropriate Credential, Certificate or Degree you have earned with two years of submitting this application.

- CDA Credential New Renewal
 CCP Credential New Renewal
 Certificate of Completion Vermont Registered Child Care Apprenticeship
 Associate Degree Major _____ Date Achieved _____
 Bachelor Degree Major _____ Date Achieved _____
 Master Degree Major _____ Date Achieved _____
 Doctorate Degree Major _____ Date Achieved _____

2) Check your present job position.

- I am a Registered Family Child Care Home Provider – Certificate # _____
 I am a staff member in licensed early childhood or afterschool care program serving Vermont children
 Employer/Program Name _____ License Certificate # _____
 Address _____ Phone _____

3) Describe your job or attach a job description. *(This bonus is for professionals providing direct care and education to children)*

4) Include the following with this application:

- ❖ Copy of Credential, Certificate or Degree awarded to you within 2 years of submitting this application. _____ Check here if you have already sent a copy of your credential, certificate or degree to Northern Lights Career Development Center. If so, you do not need to include a copy with this application.
- ❖ Individual Professional Development Plan (IPDP): The Plan must include specific short and long term learning goals and your strategies to achieve them. _____ Check here if you have an up-to-date IPDP in Bright Futures Information System. If so you do not need to send it with the application.
- ❖ **(For center-based staff)** Letter from your director or supervisor: This letter must confirm your employment for the past 6 months. If you have been employed in other child care programs, list them and include location and contact information.

5) Sign one of the following certifications:

Certification for Bonus Grant Application

I certify that the information contained in this application is true and correct; I also certify that the following statements are true:

- 1) My program will comply with applicable eligibility criteria of the Child Care Development Fund including not discriminating or barring participation on the basis of race, religion, sex, color, handicap or national origin.
- 2) I have worked directly with children at the location indicated on this application for at least 6 months.
- 3) I plan to work in regulated child care or afterschool care setting serving Vermont children for at least 1 year.
- 4) I am a Vermont resident.
- 5) I am not a public school employee and my salary is not paid by a public school.
- 6) The program I work in is in good regulatory standing with the Child Development Division and any outstanding violations have been corrected which means that I also certify that within the past twelve months all regulatory violations are corrected, no "Parental Notification letter/s" have been mailed and the program does not have a pattern of repeated regulatory violations with the CDD.

Applicant's Signature: _____ Date: _____

OR

Alternative Certification for Bonus Application

I certify that the information contained in this application is true and correct;

I also certify that the following statements are true:

- 1) My program will comply with applicable eligibility criteria of the Child Care Development Fund including not discriminating or barring participation on the basis of race, religion, sex, color, handicap or national origin.

- 2) I have worked directly with children at the location indicated on this application for at least 6 months.
- 3) I plan to work in regulated child care or afterschool care setting serving Vermont children for at least 1 year.
- 4) I am a Vermont resident.
- 5) I am not a public school employee and my salary is not paid by a public school.
- 6) My program does not currently meet the criteria for good regulatory standing due to the following:

- 7) I am requesting a waiver from the grant requirement of good regulatory status for the following reasons:

Applicant's Signature _____ **Date** _____

Make 3 copies of your complete* application. Keep one for yourself, and send two copies to the address below. Be sure to sign the appropriate certification for your application! * Complete means all the required enclosures and attachments are included with each application.

Child Development Division
ATTN: Linda Clark
103 South Main Street, 2 North
Waterbury, Vermont 05671-2902
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email: linda.clark@ahs.state.vt.us

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