



NBCDI
National Black Child
Development Institute



T.E.A.C.H. Early
Childhood®
WASHINGTON, DC
A Program of National Black
Child Development Institute

T.E.A.C.H. Early Childhood® Scholarship Program, Washington, D.C. Application

Please write legibly and ensure each section of the application is completed.

Date _____

Name		
Address		
City, State, Zip		
County		
Phone Number	Home:	Work:
SSN		
Email		
Date of Birth	(MM/DD/YYYY)	
Gender		

Employment Status

What is your current job title?	<input type="checkbox"/> Teacher <input type="checkbox"/> Assistant Teacher <input type="checkbox"/> Administrator	<input type="checkbox"/> Family Based Professional <input type="checkbox"/> Non-Teaching Professional Staff <input type="checkbox"/> Non-Teaching Support Staff
What age groups do you teach? <i>(please check all that apply)</i>	<input type="checkbox"/> Infants (0-12 Months) <input type="checkbox"/> Toddler (13-36 Months)	<input type="checkbox"/> Preschool (37 Months – PreK) <input type="checkbox"/> School Age

How many children are in your classroom or child care home? _____

How many hours per week do you work? _____

How many months per year do you work? _____

Beginning date of employment at current facility? _____

What is your current hourly wage? _____

How long have you worked in the field of early childhood?	<input type="checkbox"/> Less Than 2 Years <input type="checkbox"/> 2-5 Years	<input type="checkbox"/> 6-10 Years <input type="checkbox"/> 10+ Years
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Ethnicity

Are you of Hispanic, Latino or Spanish origin?

- | | |
|--|--|
| <input type="checkbox"/> No | <input type="checkbox"/> Yes, Puerto Rican |
| <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano | <input type="checkbox"/> Yes, Cuban |
| | <input type="checkbox"/> Other Hispanic, Latino or Spanish |

Do you consider yourself....?

- | | | |
|--|--|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Chinese | <input type="checkbox"/> Other Asian: |
| <input type="checkbox"/> Black, African American | <input type="checkbox"/> Korean | <input type="checkbox"/> _____ |
| <input type="checkbox"/> American Indian or
Alaska Native | <input type="checkbox"/> Guamanian or Chamorro | <input type="checkbox"/> Other Pacific Islanders: |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Filipino | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Other Race: |
| <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Samoan | <input type="checkbox"/> _____ |

How did you hear about the T.E.A.C.H. Early Childhood® Project?

- | | | |
|---------------------------------------|---|---|
| <input type="checkbox"/> Presentation | <input type="checkbox"/> My Center Director | <input type="checkbox"/> Other (Please specify.): |
| <input type="checkbox"/> Mailing | <input type="checkbox"/> T.E.A.C.H. Recipient | <input type="checkbox"/> _____ |
| <input type="checkbox"/> CCR&R Agency | <input type="checkbox"/> Workshop | |
| <input type="checkbox"/> College | <input type="checkbox"/> Website | |

Please check the box that best describes your educational history:

- | | | |
|--|---|--|
| <input type="checkbox"/> No high school diploma | <input type="checkbox"/> Associate Degree
(Major: _____) | <input type="checkbox"/> Masters
(Major: _____) |
| <input type="checkbox"/> High school diploma/GED | <input type="checkbox"/> Bachelor Degree
(Major: _____) | <input type="checkbox"/> Doctorate |
| <input type="checkbox"/> 1-year certificate | | |

****If you have attended college, please attach your transcripts.****

Please check the one that best describes your educational goals:

- Earn an Early Childhood or School-Age Credential.
- Take a few Early Childhood courses to obtain or upgrade job-related skills.
- Earn an Early Childhood, Infant/Toddler or School-Age Certificate.
- Earn an Early Childhood Associate Degree.
- Earn an Early Childhood Associate Degree and transfer to a four-year college/university to earn a Bachelor's Degree.

Are you currently enrolled at a college or university?

- Yes No

When would you like your scholarship to begin?

- FALL SPRING SUMMER (Circle one.) _____(Year)

Which school will you be attending? _____

Which of the following credentials and specializations do you currently hold?

- | | |
|--|--|
| <input type="checkbox"/> CDA: Infant/Toddler | <input type="checkbox"/> Specialization: Bi-Lingual
(Language: _____) |
| <input type="checkbox"/> CDA: Preschool | <input type="checkbox"/> [State] Issued Credential |
| <input type="checkbox"/> CDA: Family Child Care Home | <input type="checkbox"/> Post BA (State Teaching License) |
| <input type="checkbox"/> CDA: Home Visitor | |

T.E.A.C.H. Early Childhood® Washington, DC - Degree Scholarship Application

Have you taken any college courses in the past two years?

- YES
 NO

Have you taken any ECE credits in the past two years?

- YES how many? _____
 NO (enter zero into 'how many?')

Are you CPR/First Aid Certified?

- YES
 NO

Which languages can you speak fluently?

- | | | |
|-----------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Japanese | <input type="checkbox"/> Swahili |
| <input type="checkbox"/> Armenian | <input type="checkbox"/> Korean | <input type="checkbox"/> Tagalog |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Lao | <input type="checkbox"/> Thai |
| <input type="checkbox"/> Creole | <input type="checkbox"/> Persian | <input type="checkbox"/> Tribal: _____ |
| <input type="checkbox"/> English | <input type="checkbox"/> Polish | <input type="checkbox"/> Urdu |
| <input type="checkbox"/> French | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Greek | <input type="checkbox"/> Russian | <input type="checkbox"/> Yiddish |
| <input type="checkbox"/> Hindi | <input type="checkbox"/> Spanish | <input type="checkbox"/> Other: _____ |

What is your preferred language for learning? _____

Family Structure

How many people live in your household?

Have either of your parents or any of your brothers or sisters attended college?

- YES
 NO

<i>Number</i>	<i>Relationship</i>
	Parents
	Siblings
	Spouse/Significant Other
	Children
	Other

Do either of your parents or any of your brothers or sisters have a college degree?

- YES
 NO

Have you applied for any of the following financial aid?

- PELL
 Scholarships
 Student Loans

Statement of Income

Job #1 Employer _____
 Hours/Week _____ Earnings _____ per _____

Job #2 Employer _____
 Hours/Week _____ Earnings _____ per _____

T.E.A.C.H. Early Childhood® Associate and Bachelor's Degree Scholarship Application

Have you applied for any other financial aid (such as Pell grants, Smart Start grants, or student loans)?

YES

NO

Source of Financial Aid #1 _____

Date of Application _____

Application Status: AWARDED DENIED PENDING

Source of Financial Aid #2 _____

Date of Application _____

Application Status: AWARDED DENIED PENDING

YOUR TOTAL INCOME \$ _____

YOUR TOTAL FAMILY INCOME (your spouse included) \$ _____

STATEMENT & SIGNATURE OF APPLICANT

I attest to the fact that the information that I have provided is true and accurate. Based on this information, I am applying to [AGENCY NAME] for a scholarship to help pay the cost of educational expenses.

Signature of Applicant

Date

*****Please attach a copy of your most recent paystub.*****

The center director, principal, owner, or chairperson must complete this agreement and sign below: The Early Childhood Scholarship Program offered requires the participation of each employer. In the event **(Applicant's Name:)** is awarded a scholarship, I understand that the center agrees to participate in **one** option below.

Center Participation Agreement		
Sponsoring Center Name	Type of Facility (Center, FCCH, etc.)	License/Registration Number
Street Name		
City/Ward:	State:	Zip Code:
Center Director:	Email:	
Phone:	Fax:	
Signature:		Date:

Associate's Degree Sponsorship
<ol style="list-style-type: none"> 1. Pay 5% of the cost of tuition for up to 12 credits during the contract period (3 semesters) 2. Pay 5% of the cost for books 3. Provide 1-3 hours of paid release time each week for the scholarship recipient. Release time will be provided only when classes are in session. The sponsoring center/school will be reimbursed for 75% of the release time hours claimed. 4. At the end of the year, upon successful completion of 9-12 credit hours, issue to the recipient: Check one option: <input type="checkbox"/> A \$300 bonus, in addition to any other expected raise or bonus. <input type="checkbox"/> A 2% raise, in addition to any other expected raise or bonus.
Bachelor's Degree Sponsorship
<ol style="list-style-type: none"> 1. Pay 5% of the cost of tuition for up to 12 credits during the contract period (3 semesters) 2. Pay 5% of the cost for books 3. Provide 1-3 hours of paid release time each week for the scholarship recipient. Release time will be provided only when classes are in session. The sponsoring center/school will be reimbursed for 75% of the release time hours claimed. 4. At the end of the year, upon successful completion of 9-12 credit hours, issue to the recipient: Check one option: <input type="checkbox"/> A \$300 bonus, in addition to any other expected raise or bonus. <input type="checkbox"/> A 2% raise, in addition to any other expected raise or bonus.

T.E.A.C.H. APPLICATION CHECKLIST

Please submit the following documents with your application:

- ┌ **FAFSA confirmation letter**
- ┌ **College Acceptance letter**
- ┌ **T.E.A.C.H. application**
- ┌ **Sponsoring center/school agreement**
- ┌ **Most recent paystub**

Please return your completed application package via email to teach_dc@nbcdi.org.