



T.E.A.C.H. Early Childhood® ARKANSAS Scholarship Application Child Care Center

- 1. There are two sections of forms in this packet—forms for the teacher-applicant and forms for the employer.**

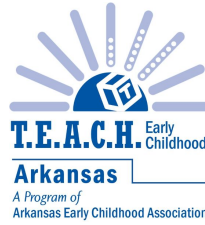
Applicant must complete pages 2-7 then give to the center director/administrator to complete pages 8-9.

- 2. With this application, applicant must also submit a current paystub dated within the past 30 days. Additional documentation will be required after application is processed.**
- 3. An application with missing information will be returned for completion.**
- 4. Sign and date every place where indicated.**
- 5. Applicant and employer must complete and submit an IRS W-9 form. The W-9 can be downloaded at <https://www.irs.gov/pub/irs-pdf/fw9.pdf>.**
- 6. When all information is completed, mail all forms and documentation to:

T.E.A.C.H. Early Childhood ARKANSAS
c/o AECA
P.O. Box 4291
Fayetteville, AR 72702**
- 7. For faster processing, you may scan all forms and documentation then email to teach@arkansasearlychildhood.org.**

Applicant Name: _____

T.E.A.C.H. Early Childhood® ARKANSAS
2024-2025 Scholarship Application
For Child Care Center Teachers/Directors
(Rev. 4/23/24)



Date of Application: _____

Are you currently enrolled? Yes No
Scholarship Start Date Requested: Fall 2024 Spring 2025 **PDR Number** _____

Information About You

Name	_____	
Address	_____	
City, St, Zip	_____	
County	_____	
Phone	Home: _____	Mobile (if different): _____
SSN	_____	
Email	_____	
Birth Date	(mm/dd/yyyy) _____	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to answer

Ethnicity

Are you Hispanic? Yes No Prefer not to answer
 White American Indian/Alaska Native
 Black/African American Native Hawaiian or Pacific Islander
 Asian Other, two or more race Other Prefer not to answer

Information about Your Current Position

What is your current job title?	<input type="checkbox"/> Director/Assistant Director <input type="checkbox"/> Other: _____ <input type="checkbox"/> Teacher <input type="checkbox"/> Assistant Teacher
How long have you worked in the field of early childhood?	<input type="checkbox"/> Less than 2 years <input type="checkbox"/> 6-10 years <input type="checkbox"/> 2-5 years <input type="checkbox"/> More than 10 years
What age groups do you teach? (check all that apply)	<input type="checkbox"/> Infants (0-12 mo.) <input type="checkbox"/> School-Age (6 yrs and up) <input type="checkbox"/> Toddler (13-36 mo.) <input type="checkbox"/> I do not work directly with children. <input type="checkbox"/> Pre-K (37 mo-5 yrs)

Beginning date of employment: _____ (Must have been employed at least 90 days.)
of children in Classroom: _____ Hours Per Week: _____
Current Wage: \$ _____ Months Per Year: _____
Paid: hourly weekly every 2 weeks twice monthly monthly

Information about Your Chosen Education and Career Goals

Describe your current level of education:

- High School Diploma
- GED
- Certificate/Credential:
Area: _____
- Associate's Degree:
Major: _____
- Bachelor's Degree:
Major: _____
- Master's Degree:
Major: _____
- Doctorate:
Field of Study: _____

Please check the option that best describes your educational goals:

- Take a few early childhood courses to obtain or upgrade job-related skills
- Earn an Early Childhood Certificate and/or complete all requirements for the CDA
- Earn an Early Childhood Certificate then continue to an associate degree program
- Earn an associate degree in early childhood education
- Earn an associate degree in early childhood education then continue to a bachelor's program
- Earn a bachelor's degree in the early childhood education
- Obtain teacher licensure in early childhood education
- Earn a master's degree in early childhood education
- Other: _____

Choose the degree program and college you plan to attend.

EARLY CHILDHOOD CERTIFICATE OR NON-DEGREE COURSEWORK

Scholarship: 80% T.E.A.C.H. - 10% Scholar - 10% Employer

- EARLY CHILDHOOD CERTIFICATE OF PROFICIENCY (10-13 hours)**
- EARLY CHILDHOOD TECHNICAL CERTIFICATE (26-42 hours)**
- NON-DEGREE SEEKING STUDENT (9-12 hours of ECE coursework only – no certificate or degree)**

- Arkansas State University at Beebe
- Arkansas State University at Newport
- East Arkansas Community College
- Northwest Arkansas Community College
- Ozarka College
- Phillips Community College of the U of A
- South Arkansas College (SEARK)
- Southern Arkansas University (SAU) Tech
- University of Arkansas Community College – Batesville
- University of Arkansas Community College – Morrilton
- University of Arkansas Community College – Rich Mountain
- University of Arkansas at Fort Smith
- University of Arkansas at Monticello College of Technology
- University of Arkansas Pulaski Technical College

Certificate of Proficiency: Completion of the Early Childhood Certificate of Proficiency will count towards the 120 hours of early childhood education training required for the Child Development Associate (CDA) credential. Certificate graduates must also obtain 480 hours of professional work experience, prepare a CDA professional portfolio and successfully complete the CDA Verification Visit conducted by a CDA PD Specialist. →→→→→→ **Are you planning to complete all requirements for a CDA?** YES NO

ASSOCIATE DEGREE

Scholarship: 80% T.E.A.C.H. - 10% Scholar - 10% Employer

- Arkansas State University at Beebe (AAS, Early Childhood Education)
- Arkansas Tech University (Associate of Science, Early Childhood)
- Northwest Arkansas Community College (AAS, Early Childhood Education)
- Phillips Community College of the University of Arkansas (AAS, Early Childhood Education)
- Shorter College (Associate of Arts in Childhood Development)
- South Arkansas College (SEARK) (AAS, Early Childhood Paraprofessional Technology)
- University of Arkansas Community College – Batesville (AAS, Early Childhood Education)
- University of Arkansas Community College – Morrilton (AAS, Early Childhood Development)
- University of Arkansas at Fort Smith (AAS, Early Childhood Education)
- University of Arkansas at Monticello College of Tech (AAS, Gen Tech with ECE Tech Certificate)
- University of Arkansas Pulaski Technical College (AAS, Early Childhood Development)

BACHELOR’S DEGREE – PUBLIC COLLEGE/UNIVERSITY

Scholarship: 80% T.E.A.C.H. - 10% Scholar - 10% Employer

- Arkansas State University Jonesboro: Bachelor of General Studies
Scholar must also complete two Early Childhood emphasis areas with this degree.
- Arkansas Tech University: B.S., Organizational Leadership w/ Child Development concentration
Scholar must complete child development concentration. Degree is only open to directors & owners.
- University of Arkansas at Fayetteville: B.S.H.E.S., Birth through Kindergarten
This degree requires on-campus attendance during the day. You must have prior approval from T.E.A.C.H.
- University of Arkansas at Fort Smith: Bachelor of Science in Early Childhood Education

MASTER’S DEGREE

Scholarship: 80% T.E.A.C.H. - 10% Scholar - 10% Employer

- Ark. State University Jonesboro: () M.S. Early Childhood Services () M.S.E. in Early Childhood Ed.
- Henderson State University: M.A.T. (Early Childhood/Special Education Integrated License)
(Applicant must hold a current Arkansas teacher license to be admitted to the MSE program.)

PRIVATE COLLEGE/UNIVERSITY

Scholarship: 45% TEACH - 50% Scholar - 5% Employer

- Harding University: B.A., Birth to Kindergarten (Early Childhood/Special Education Integrated License)
- Harding University: M.A.T. (Early Childhood/Special Education Integrated License)

This is a 50% scholarship model with a maximum tuition/fee benefit of \$2,500 each semester.

OTHER PROGRAMS AT PUBLIC INSTITUTIONS

Scholarship: 80% T.E.A.C.H. - 10% Scholar - 10% Employer

If you do not see your preferred college or program listed, you may list it here. (Colleges must first be approved by T.E.A.C.H.) If the degree meets requirements and the school agrees to the payment terms, we will process the scholarship. Approval is not guaranteed and is subject to deadlines and funding availability.

Name of College Degree Program

Applicant Name: _____

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

- Presentation
- Mailing
- College
- My Center Director
- T.E.A.C.H. Recipient
- Workshop
- AECA Website
- Other (please specify): _____

Additional Information about Your Background and Experiences

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

- CDA: Infant/Toddler
- CDA: Preschool
- CDA: Family Child Care Home
- CDA: Home Visitor
- Arkansas Issued Credential
- Post BA (state teaching license)
- None of these apply

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 NO
If yes, how many? _____

Are you CPR/First Aid Certified? YES NO

Which languages can you speak fluently?

- Arabic
- Korean
- Thai
- Armenian
- Lao
- Tribal: _____
- Chinese
- Persian
- Urdu
- Creole
- Polish
- Vietnamese
- English
- Portuguese
- Yiddish
- French
- Russian
- Other: _____
- Greek
- Spanish
- Hindi
- Swahili
- Japanese
- Tagalog

What is your preferred language for learning? _____

Family Structure

How many people live in your household? _____

Number	Relationship
	Parents
	Siblings
	Spouse/Significant Other
	Children
	Other

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

- YES NO

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

- YES NO

Your Acknowledgements & Signature

I am applying for a T.E.A.C.H. Early Childhood® ARKANSAS scholarship to help cover the cost of my higher education program in early childhood. I certify that all information that I have provided is true and accurate. I understand that all T.E.A.C.H. Early Childhood scholarships are contingent on the availability of funding and the program may be terminated at any time. I understand that funding priorities (including but not limited to income and type of degree program) may be used to determine the order of application acceptance and any waiting list. I understand any omission or incorrect information may be grounds for rejection of application or revocation of scholarship.

Signature of Applicant

Date

Print Name

**T.E.A.C.H. Early Childhood® ARKANSAS
Income Statement**

Complete all fields. Blank forms will be rejected.

Applicant: _____

Job #1

Employer _____

Hours/Week _____ Gross Earnings: \$ _____

How often are you paid? Weekly Biweekly Twice monthly Monthly

Months per year worked: _____

If you work less than 12 months per year, are you still paid over 12 months? Yes No

Job #2

Employer _____

Hours/Week _____ Gross Earnings: \$ _____

How often are you paid? Weekly Biweekly Twice monthly Monthly

Months per year worked: _____

If you work less than 12 months per year, are you still paid over 12 months? Yes No

YOUR MONTHLY INCOME \$ _____

Have you applied or been approved for any of the following additional financial aid?

PELL Grant Applied Approved Amount (if known); \$ _____

Student Loan* Applied Approved Amount (if known); \$ _____

Other Scholarship Applied Approved Amount (if known); \$ _____

**APPLICANT MUST INCLUDE A PAYSTUB DATED WITHIN THE LAST 30 DAYS
WITH THIS APPLICATION.**

Applicant Name: _____

**T.E.A.C.H. Early Childhood® ARKANSAS
Scholarship Application for Child Care Centers
Participation Agreement Page**

THIS FORM MUST BE COMPLETED AND SIGNED BY THE CHILD CARE PROGRAM/EMPLOYER.

The Early Childhood Scholarship Programs offered through T.E.A.C.H. Early Childhood® ARKANSAS require the sponsorship of each scholarship recipient’s employing child care center.

In the event _____ (name) is awarded a scholarship, I understand the center agrees to participate as follows:

- Maintain the program’s Arkansas Child Care license in good standing.
- Pay employer portion of the cost of tuition and fees each semester for approved courses.
- Pay employer portion of the cost of books each semester.
- Provide paid release time for the scholarship employee equal to the number of credit hours the employee is taking for the semester, up to a maximum of 96 hours per semester.
- Pay a \$300 stipend upon recipient’s successful completion of contract coursework and commitment (annually) or provide the minimum required annual pay raise.

Name of Child Care Center License Number

Address City County Zip

For Teachers/Assistant Teacher Scholarships:

Name of Early Childhood Center Signature of Director/Owner

Name of Director/Owner Date Signed

For Director Scholarships:

Name of Early Childhood Center Signature of Owner/Board Chair

Name of Owner/Board Chairperson Date Signed

T.E.A.C.H. Early Childhood® ARKANSAS
SPONSORING CHILD CARE CENTER PROFILE
To be completed by the Child Care Center Director or Owner

Child Care Center _____

License # _____ County _____

Director's Name _____ Today's Date _____

Director's
E-mail Address _____

Physical Location Address:

Mailing Address (if different):

 _____ Zip _____

 _____ Zip _____

Phone () _____

Is the center managed or owned by another agency/organization? Yes No

If yes, please provide the following information for the owner organization or central office:

Name _____
 Address _____
 _____ Zip _____
 Phone () _____

← { **Should bills, invoices and payments be sent to the central office?** Yes No

<p>Better Beginnings Level</p> <p><input type="checkbox"/> Currently do not participate</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6</p> <p>Nationally Accredited (NAEYC)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you have a current voucher participation agreement with DHS?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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<p align="center">Type of Agency (check all that apply)</p> <p><input type="checkbox"/> Private For-Profit <input type="checkbox"/> Non-profit</p> <p><input type="checkbox"/> Sole Proprietorship</p> <p><input type="checkbox"/> Partnership <input type="checkbox"/> Corporation</p> <p><input type="checkbox"/> Head Start <input type="checkbox"/> Public School</p> <p><input type="checkbox"/> Faith-based <input type="checkbox"/> State Pre-K</p> <p>License Capacity _____</p> <p>Currently Enrolled _____</p>

Program Funding: Head Start Early Head Start Arkansas Better Chance
 (check all that apply) CCDF PreK IDEA/Medicaid Vouchers (Subsidy)