

Agency: _____ Advisor or Counselor: _____ Date: _____

Santa Cruz County
 Early Care and Education
Application for Advising Services
 For Students, Child Care Assistants, Teachers and Directors

PLEASE ATTACH:

- TRANSCRIPTS (COPY OKAY)**
- COPY OF PERMITS**
- CERTIFICATES**
- DEGREES**

Please complete this application in ink.

Section 1: Advisee Information – Please complete this section each time advised.

<u>Please check all that apply:</u> New to advising process Returning for advisement Currently not employed in Early Care and Education. Currently employed in an Early Care and Education job. 2 yrs+ experience and at least 24 units of ECE Less than 2 yrs experience and at least 24 units of ECE		<u>Please check all that apply:</u> New student Current or Returning ECE student (minimum 3 units ECE) Completed at least 12 units ECE Completed 24 or more units ECE and at least 16 units GE Returning student (non-ECE)	
Last Name	First Name	Middle Name	
Your Name at Birth (If different from above)			
Last		First	Middle
Any Other Names You Have Used			
Last		First	Middle
Student I.D. (optional)		Gender : _____	
		Racial Identity/Ethnicity : _____	
Date of Birth Month Day Year		Place of Birth (State, Country)	
Home Address or P.O. Box			Apt. or Space #
City		State	Zip Code
Work Phone	Home Phone		Cellular Phone
E-Mail Address			
Please list all languages that you are able to use to communicate with parents or children at work.			
1. _____ 2. _____ 3. _____			

Section 2: Education Information – All advisees complete this section.

Mark ALL the boxes that pertain to the levels of education you have completed:	Child Development Permit Information
<p>Less than High School</p> <p>Some High School</p> <p>High School Graduate (or GED)</p> <p>Some College</p> <p>A.A./A.S. Degree in: _____</p> <p>B.A./B.S. Degree in: _____</p> <p>Masters degree in: _____</p> <p>PhD degree in: _____</p> <p>Teaching Credential (specify type): _____</p> <p>Other college certificates _____</p> <p>Was part of your education obtained outside the United States?</p> <p>Yes No If yes, where? _____</p>	<p>Mark this section if you currently hold a valid Child Development Permit.</p> <p><i>Attach a copy of the permit or temporary certificate to this application.</i></p> <p>None</p> <p>Assistant</p> <p>Associate Teacher</p> <p>Teacher</p> <p>Master Teacher</p> <p>Site Supervisor</p> <p>Program Director</p> <p>Lifetime Permit</p> <div data-bbox="1122 464 1479 596" style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>Date permit was applied for or issued:</p> <p>_____</p> </div>

Section 3: Education/Career Goals– All advisees complete this section.

Indicate the educational goals you wish to obtain:	Indicate current progress toward educational goals:
<p>Obtain a new or higher level Child Development Permit</p> <p>Obtain a college A.S./A.A. degree or certificate.</p> <p>Obtain a 4-year, BA/BS degree.</p> <p>Advance my education by taking some college courses.</p> <p>Obtain proficiency in English and/or other basic skills.</p> <p>Work in an early care and education program with young children.</p> <p>Become a director of an early care and education program.</p> <p>Open my own early care and education program.</p> <p>Increase my skills and knowledge to get promoted in my current position.</p> <p>Attend trainings and workshops on ECE topics.</p> <p>Other: _____</p> <p>_____</p>	<p>I have met with a college counselor/advisor/instructor</p> <p>Name: _____</p> <p>Date: _____</p> <p>Name: _____</p> <p>Date: _____</p> <p>Name: _____</p> <p>Date: _____</p> <p>I have a professional growth advisor and plan</p> <p>Name of Advisor: _____</p> <p>Insert info re: child development permit renewal requirements</p>

Section 4: Work Experience in Early Care and Education

PART A: All advisees who are currently employed in Early Care and Education please complete this section.		
Dates of work with children (paid or volunteer):	Total number of days worked (three or more hours per day):	Age Groups Worked With (0-5, Kinder, Elementary):
<p>From (month/year) _____</p> <p>to (month/year) _____</p>		
<p>From (month/year) _____</p> <p>to (month/year) _____</p>		
<p>From (month/year) _____</p> <p>to (month/year) _____</p>		
<p>From (month/year) _____</p> <p>to (month/year) _____</p>		

Semester	Term:	Achievement	Term:	Achievement:
Education				
Experience				
Professional Dev.				