

Kansas Early Childhood Director Credential Experience Form

APPLICATION FOR: (check one)

Provisional Credential

Credential

Renewal – Provisional

Renewal – Credential

Name (Last, First, Middle Initial)

TEACHING EXPERIENCE

(Requirement: Provisional and Credential – 500 clock hours of teaching experience with children. At least 90% of this experience shall be with children birth to kindergarten eligibility in a state-approved early childhood setting. The remaining 10% can be with school age children in a state-approved school age setting. Only paid experience in a position or supervised teaching as part of college coursework shall be counted. Attach additional sheet if necessary.)

Please list the programs in which you have worked, including current employment, which you are using to meet this requirement.

Program Name	Address (street, city, state, zip)	Position (Lead, Assistant, Student teacher)	Employment Start Date- End Date MM/DD/YY	Average hours worked in classroom (per week)	Age(s) of children served
1.					
Supervisor/Director:			Phone:		
2.					
Supervisor/Director:			Phone:		
3.					
Supervisor/Director:			Phone:		
4.					
Supervisor/Director:			Phone:		
5.					
Supervisor/Director:			Phone:		

*If there is no supervisor or director available, please attach letter, pay stub, or other documentation to verify employment.

ADMINISTRATIVE EXPERIENCE

(Requirement: Provisional level: Minimum of 1000 clock hours in at least three categories; Credential level: 3600 clock hours in at least five categories. At least 90% of this administrative experience shall be in a program serving children aged birth to kindergarten entry in a state-approved early childhood setting. The remaining 10% can be administrative experience serving school-age children in a state-approved school-age setting. Only experience in a paid position or a supervised administrative internship shall be counted. Attach additional sheet if necessary.)

Please list below the programs in which you have worked that you are using to meet this requirement.

Program Name	Address (street, city, state, zip)	Position	Employment Start Date-End Date mm/dd/yy	Average hours worked in administration (per week)
1.				
2.				
3.				
4.				
5.				

*Attach a description of responsibilities for each position listed.

Attn: Kansas Early Childhood Director Credential Consortium

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