

Recognizing People who Provide Child Care, Early Education & School-Age Care.

Practitioners can use the Pathways Career Lattice to chart a course for their own career development and receive recognition for education and professional achievements. Pathways was designed to encourage professional development for individuals who are dedicated to promoting healthy, safe, and developmentally appropriate learning experiences for children and youth. Seven levels of professional achievement are defined and include education, experience and professional growth requirements. By developing a knowledgeable and skilled work force, the Career Lattice can lead to an increase in the number of quality programs for children and youth in South Dakota. Please refer to the SD Pathways to Professionalism handbook for more information. The handbook can be accessed online at: <a href="http://dss.sd.gov/childcare/pathwaystopd/">http://dss.sd.gov/childcare/pathwaystopd/</a>

| GENERAL INFORMATION   |                     |                 |  |  |  |  |
|---|---------------------|-----------------|--|--|--|--|
| 1. Personal   |                     |                 |  |  |  |  |
| First Name:   |                     | Last Name:      |  |  |  |  |
| Home Mailing Address:   |                     |                 | PO Box:                                |  |  |  |
| City:   |                     | State:          | Zip:                                   |  |  |  |
| Social Security #   |                     |                 |  |  |  |  |
| Home Phone: Work Phone:   |                     | E-Mail Address: |  |  |  |  |
| <b>2. Education:</b> (Check all that apply) Attach a diploma.               | copy of your curr   | rent credential | or certificate, college transcript and |  |  |  |
| ☐ GED   | High School Diploma |                 |  |  |  |  |
| ☐ Vocational Certificate/Diploma  | Area of Study:      |                 |  |  |  |  |
| SD Certificate (Infant/Toddler, Out-of-School Time (OST), Leadership, etc.) | Please specify:     |                 |  |  |  |  |
| ☐ Child Development Associate Credential (CDA) ☐ SD OST Credential          | Endorsement:        |                 |  |  |  |  |
| Apprenticeship Certificate  | Area of Study:      | Area of Study:  |  |  |  |  |
| Associates  | Major:              |                 |  |  |  |  |
| Bachelors   | Major/Minor:        |                 |  |  |  |  |
| ☐ Masters   | Major/Minor:        |                 |  |  |  |  |
| ☐ Doctorate   | Major/Minor:        |                 |  |  |  |  |
| Other (Please explain):   |                     |                 |  |  |  |  |
| 3. Gender   |                     |                 |  |  |  |  |
| ☐ Female ☐ Male   |                     |                 |  |  |  |  |
| 4. Age  |                     |                 |  |  |  |  |
| ☐ 17-19 yrs. ☐ 20-29 yrs. ☐ 30-39 yrs.                                      | ☐ 40-49 yrs.        | ☐ 50-59 yrs.    | ☐ 60 yrs & over                        |  |  |  |
| 5. Race and Ethnic Background: (Check all that apply)                       |                     |                 |  |  |  |  |
| ☐ White/Caucasian ☐ Native American/Al                                      | laskan Native       | Black/African   | American                               |  |  |  |
| ☐ Asian/Oriental ☐ Native Hawaiian/Pacific Islander ☐ Hispanic or Latino    |                     |                 |  |  |  |  |
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| 6. Current Employment:   |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| Place of Employment:  Provider # (if applicable):  |  |  |  |  |  |  |  |
| Director/Supervisor Name(if applicable):   |  |  |  |  |  |  |  |
| Address: PO Box:   |  |  |  |  |  |  |  |
| City: State: Zip Code: Work Phone:   |  |  |  |  |  |  |  |
| Start Date with Current Employer: Month/Year:/   |  |  |  |  |  |  |  |
| Type of Provider:  |  |  |  |  |  |  |  |
| ☐ Child Care Center ☐ Group Family Child Care ☐ Preschool ☐ Out of School Time   |  |  |  |  |  |  |  |
| ☐ Unregulated Family Child Care ☐ Regulated Family Child Care ☐ Training Site ☐ College/University                       |  |  |  |  |  |  |  |
| Child & Family Services Head Start/Early HS Other (specify)  |  |  |  |  |  |  |  |
| Ages of Children You Work With: (If applicable; check all that apply:)   |  |  |  |  |  |  |  |
| ☐ Infant-Toddlers (6 weeks-3 years) ☐ Mixed Ages (0-13) ☐ Youth (14-18)  |  |  |  |  |  |  |  |
| ☐ Pre-school (3-5 years) ☐ School-aged (K-13 years) ☐ Not currently working with children                                |  |  |  |  |  |  |  |
| Position Title: Select title that best represents your current position:   |  |  |  |  |  |  |  |
| ☐ Primary Caregiver ☐ Family Child Care Provider ☐ Higher Education Faculty  |  |  |  |  |  |  |  |
| Staff Supervisor   |  |  |  |  |  |  |  |
| Assistant or Aide Program Director Other (please specify)  |  |  |  |  |  |  |  |
| Lead Teacher/Teacher   |  |  |  |  |  |  |  |
| Assistant Teacher Site Coordinator   |  |  |  |  |  |  |  |
| Compensation/Wage: (This information is kept confidential and used only for data analysis.)                              |  |  |  |  |  |  |  |
| ☐ Minimum Wage - \$8.00/hour       ☐ \$8.01 - \$10.00/hour       ☐ \$10.01 - \$12.00/hour       ☐ \$12.00 - \$15.00/hour |  |  |  |  |  |  |  |
| □ \$15.01 – \$20.00/hour □ More than \$20.00/hour  |  |  |  |  |  |  |  |
| 7. Current & Previous Work Experience in This or Related Field:  |  |  |  |  |  |  |  |
| Indicate the number of years of experience working directly with children in the following program types:                |  |  |  |  |  |  |  |
| Child care programOut-of-School-Time Head Start Private Preschool Elementary School                                      |  |  |  |  |  |  |  |
| Family Day Care Provider N/A Other (specify)   |  |  |  |  |  |  |  |
| Indicate the total number of years of experience you have been a trainer and/or promoted                                 |  |  |  |  |  |  |  |
| the development of other practitioners, if this is your role:  |  |  |  |  |  |  |  |
| Program director Trainer Mentor Not applicable   |  |  |  |  |  |  |  |
| Other (Please specify):  |  |  |  |  |  |  |  |
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Please note: Pages 3-6, Sections 8-12 must also be completed or your renewal application cannot be processed. Under Career Lattice Qualifications, check the level of recognition you are renewing or new level requested and identify all documentation required for that level on the checklist below. First Aid training and CPR certification are required for all candidates working directly with children. All documentation needs to be attached. Please refer to the Pathways program handbook for more information. This handbook can be accessed online at: <a href="http://dss.sd.gov/childcare/pathwaystopd/">http://dss.sd.gov/childcare/pathwaystopd/</a>

#### **Career Lattice Qualifications** 8. CPR/First Aid: Indicate if you are Infant and Child CPR certified and if you have received First Aid training. A copy of your current CPR certification and First Aid Training verification must be submitted if you work directly with children. ☐ I **do not** currently work with children I do currently work with children (If so, check the following and attach verifications.) ☐ I have had First Aid Training within last year - and- ☐ I am currently CPR Certified 9. Select the level of recognition you are applying for: Level I Level II Level III Level IV Level V Level VI Level VII **Level I - Introductory Informal Education** High School Diploma or GED 6 hours of training (within the last year) in **two** or more of the 15 Professional Training Areas found on page 5 of the Pathways to Professional Training booklet. This does NOT include CPR/First Aid training hours. Documentation of training hours must be submitted for the past year only. Work directly with children in an unregistered, registered, or licensed child care, preschool, Head Start or School-Age program. **Level II - Advanced Informal Education** High school diploma or GED 20 hours of training (within the last year) in four or more of the 15 Professional Training Areas found on page 5 of the Pathways to Professional Training booklet. This does NOT include CPR/First Aid training hours. Documentation of training hours must be submitted for the past year only. Work directly with children in a registered, or licensed child care, preschool, Head Start or School-Age program. Current membership in a recognized professional early childhood or related organization -OR-- Attend a minimum of six hours of professional development conference training in the last two years. Documentation must be submitted. Level III – CDA or OST Credential or Vocational Certificate High school diploma or GED Completion of a minimum of 120 hours instruction and procedures required to obtain a credential. Copy of current Credential certificate is required. Work directly with children in a registered or licensed child care, preschool, Head Start or School-Age program or other youth serving program **OR** Provides leadership and/or instruction that contributes to the development of other practitioners. Current membership in a recognized professional early childhood or related organization. Documentation must be submitted. Attend a minimum of six hours of professional development conference training within the last two years. Documentation must be submitted.



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| Level IV - Apprenticeship Certificate or Higher Education Coursework |   |  |  |  |
|--|---|--|--|--|
|  | Completion of Child Care and Early Education Apprenticeship training and certification <b>OR</b> A minimum of 12 college credits in early childhood education or family relations. <b>Copies of certificates, diploma, and/or transcripts must be submitted.</b>  |  |  |  |
|  | At least two years of experience working with children in a state- registered or licensed child care, preschool, Head Start, or School-age program in the last six years, <b>OR</b> At least two years of experience promoting the development of other practitioners (i.e. professional roles such as program director, trainer, Head Start education coordinator, etc.) |  |  |  |
|  | Current membership in a recognized professional early childhood or related organization. <b>Documentation must be submitted.</b>  |  |  |  |
|  | Attend a minimum of six hours of professional development conference training within the last <b>two</b> years. <b>Documentation must be submitted.</b>   |  |  |  |
|  | Level V - Early Childhood Associates Degree   |  |  |  |
|  | Associate's Degree with a minimum of 18 early childhood credits <b>OR</b>   |  |  |  |
|  | An unrelated bachelor's degree combined with demonstrated work experience and professional training that is relevant to the early childhood field. <b>Copies of certificates, diploma, and /or transcripts must be submitted.</b>   |  |  |  |
|  | At least two years of work experience in a program with children in a state-registered or licensed child care, preschool, Head Start or School-age program in the last four years, <b>OR</b>  |  |  |  |
|  | Supervised practicum or field experience as required by the associates degree program, <b>OR</b> A minimum of two years of experience promoting the development of other practitioners (i.e. professional roles such as program director, trainer, Head Start education coordinator. etc).  |  |  |  |
|  | Attend a minimum of six hours of professional development conference training within the last <b>two</b> years. <b>Documentation must be submitted.</b>   |  |  |  |
|  | Current membership in a recognized professional early childhood or related organization. <b>Documentation must be submitted.</b>  |  |  |  |
|  | Level VI - Baccalaureate Degree   |  |  |  |
|  | Bachelor's degree in a related field of study combined with work experience and professional training. Copies of certificates,  |  |  |  |
|  | diploma, and/or transcripts must be submitted.  |  |  |  |
|  | At least four years working with children in a state-registered or licensed child care, preschool, Head Start or School-age program in the last four years, <b>OR</b>   |  |  |  |
|  | Supervised practicum or field experience as required by the bachelor's degree program, <b>OR</b>  |  |  |  |
|  | Two years of experience promoting the development of other practitioners (i.e. professional roles such as program director,   |  |  |  |
|  | trainer, Head Start education coordinator, etc.).  Current membership in a recognized professional early childhood or related organization. <b>Documentation must be</b>  |  |  |  |
|  | submitted.  |  |  |  |
|  | Attend a minimum of six hours of professional development conference training within the last <b>two</b> years. <b>Documentation must be submitted.</b>   |  |  |  |
|  | Level VII - Masters and Doctoral Degree   |  |  |  |
|  | Master's or Doctoral degree in early childhood or a closely related field with graduate level coursework in the Specialty Areas of Education (refer to the Glossary, page 27 of the Pathways to Professional Training booklet). <b>Copies of certificates, diploma, and/or transcripts must be submitted.</b>   |  |  |  |
|  | At least four years of experience promoting the development of other practitioners.   |  |  |  |
|  | Serve as a mentor and educator to others in the field.  |  |  |  |
|  | Current membership in a recognized professional early childhood or related organization. <b>Documentation must be submitted.</b>  |  |  |  |
|  | Attend a minimum of six hours of professional development conference training in the last <b>two</b> years. <b>Documentation must be submitted.</b>   |  |  |  |
|  | Demonstration of professional leadership. (Submit vitae or resume with summary of leadership positions and/or activities.)  |  |  |  |
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| <b>10. Conference</b> (Attendance at a conference of at least six contact for <b>all Levels</b> of the Lattice except Levels I & II. Level II candid professional conference OR a professional membership):   |                                     |  |   |  |  |  |
|---|-------------------------------------|--|---|--|--|--|
| <ul> <li>A recognized professional development conference or seminar of at least six contact hours designed specifically to<br/>address issues affecting children, families, and the professional development of individuals who work within the<br/>field.</li> </ul>  |                                     |  |   |  |  |  |
| • Examples of such conferences include, but are not limited to: the Family Child Care Professionals of So. Dakota Conference, Regio Association of Child Care Directors' conferences, the SoDakSACA Retreat, and regional or national early childhood or school-age con   | nal or Na<br>A school               | ational Head Start co<br>age conference and/   | nferences, the SD                                     |  |  |  |
| COPIES OF ATTENDANCE CERTIFICATES MUST BE SU  | MITTEI                              | O WITH THIS APPL   | ICATION.  |  |  |  |
| ☐ Professional Conferences Attended (Use back of form if more space is needed)  | Month                               | Year 7   | Total Hours Attended                                  |  |  |  |
|   |                                     |  |   |  |  |  |
|   |                                     |  |   |  |  |  |
| <ul> <li>Copy of membership must be submitted with this application. affiliates of either regional, state, or national organizations such as of Young Children (an affiliate of NAEYC), the Council for Except Professionals of So. Dakota, the So. Dakota Association of Child Children, the National Head Start Association and other national as Membership in Organizations (Use back of form if more space is needed)</li> </ul> | : the Sou<br>ptional C<br>Care Dire | on the Dakota Association of the Pamily Control of the Pamily Cont | on for the Education<br>Child Care<br>School Age Care |  |  |  |
| Membership in Organizations (Use back of form if more space is needed)  |                                     | From/Year  | Thru/Year   |  |  |  |
|   |                                     |  |   |  |  |  |
| <b>12.Leadership:</b> (Required only for Level VII of the Lattice.)   |                                     |  |   |  |  |  |
| Copy of Vitae or resume must be submitted with this application individuals have played or positions of leadership held that contributions in the past 5 years.   |                                     |  |   |  |  |  |
| ☐ Leadership Role Performed. Describe your leadership role below or use back of form:   |                                     | From/Year  | Thru/Year   |  |  |  |
|   |                                     |  |   |  |  |  |
|   |                                     |  |   |  |  |  |
|   |                                     |  |   |  |  |  |



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### Before submitting the application and required documents, please review the following:

#### **Renewal Application Verification**

- Complete <u>all sections</u> of the Renewal Application (Section numbers 1 12). Do not leave any sections blank.
- All renewal candidates are required to submit <u>legible copies</u> of training documentation such as certificates, credentials or diplomas that provide evidence of your educational achievements. This documentation will be utilized to determine the level of the Career Lattice for which you will be recognized.
- All renewal candidates working with children are required to submit documentation of current CPR certification & First Aid training.
- All renewal candidates must provide documentation of training required for the Pathways level they seek. Submit copies of training attendance records, official conference attendance certificates, etc.
- All renewal candidates Level III and above must provide documentation of membership in a professional organization.
- Renewal candidates for Level VII must also submit documentation of professional leadership.
- Mail this application to the address listed below with all required training and professional commitment documentation.
- Please mail COPIES only of original certificates, awards, or other forms of documentation. Do not send originals as these documents <u>will not</u> be returned to you.

| I certify that the application information and supporting documentation that I have submitted is complete and |
|---|
| accurate to the best of my knowledge. I understand all information submitted will remain confidential.        |

| Signature of Renewal Applicant: _ | <br>Date: |
|-----------------------------------|-----------|

#### THANK YOU FOR SUBMITTING YOUR RENEWAL APPLICATION!

If you have any questions related to completing this renewal application, call the S.D. Dept. of Social Services – Division of Child Care Services at (605)773-4766 or toll free 1(800)227-3020.

Submit this application and required documentation to:

DSS – Division of Child Care Services

910 E. Sioux Ave.

Pierre, SD 57501

