



Scholarship Application
for the Human Resources Management course of the
Vermont Early Childhood and Afterschool Program Director Credential
Semester _____

Northern Lights can award a limited number of scholarships **(\$300.00)** each semester to Program Director Credential candidates enrolling in the Human Resources Management course. Scholarships will be awarded on a first-come, first-served basis. Eligible students will receive a partial tuition voucher. You must present your voucher when you register for the course. The remaining balance of the tuition, fees, and book costs will be the responsibility of the student. Students are encouraged to meet with their local CCV Financial Aid Counselor to determine eligibility for other forms of financial aid.

Name _____ BFISQuality/Credential ID: _____

Mailing Address _____

Email _____ Phone _____

Current place of employment _____

of children in program _____ Age range of children _____ #of staff _____

Is this program accredited? (Specify type: NAEYC, NAFCC, # of STARS, NAA, etc.)

What is your current position? _____

Describe your responsibilities _____

Length of time in current position _____

Have you completed Step 1 of the Program Director Credential? Yes No

Visit the **Program Directors** page on the Northern Lights website for a copy of the Step 1 and 2 Application, and to download materials that will help you to organize your Program Director Portfolio. <http://northernlights.cdc.org>

Scholarship requirements:

- I am employed as an early childhood or afterschool professional, and I am currently working on my Program Director Credential.
- My IPDP (Individual Professional Development Plan) is current and reflects this as a goal. **(Please attach)**

I certify that the following statements are true (Select one)

- My program is in good regulatory standing with the Child Development Division, which means that within the past twelve months any regulatory violations have been corrected, no Parental Notification Letters have been mailed, and the program does not have a pattern of repeated regulatory violations with CDD

- My program has received the following violations, but had no Parental Notification Letter violations in the previous 12 months. I have attached a statement detailing the violations(s) and what I am personally doing to make sure the violations do not happen again.

Signature _____ Date _____

Send this application and a copy of your Individual Professional Development Plan (IPDP) to:

Vermont Northern Lights Career Development Center
CCV-307 South St.
Springfield, VT 05156

For office use only:

Application received _____ Application number _____ Date voucher sent _____