



**Vermont Northern Lights  
Career Development Center**

BFIS Q and C account #: \_\_\_\_\_

CCV, PO Box 489, Montpelier, VT 05601  
Phone: 802.828-2876 FAX 802-828-2805  
Email: [vtlight@ccv.edu](mailto:vtlight@ccv.edu)  
Website: <http://northernlightscdc.org>

## Application for a Career Ladder Level I Certificate

Detailed information about each Level of the Career Ladder and the applications are on the Northern Lights website. Applications are accepted anytime. Incomplete applications cannot be processed. Please contact Northern Lights if you have any questions. After your application is processed you will receive a certificate and a pin recognizing your accomplishment, and your name will be in the next Northern Lights Newsletter!

The requirements for a **Career Ladder Level I certificate** are 1) either the successful completion of the course "Fundamentals for early childhood professionals" or Northern Lights CDC approved equivalent or an approved 3 credit child development college course + other requirements and 2) one year of experience working with young children in a group setting and 3) a current Individual Professional Development Plan (IPDP).

After you are awarded a Level I certificate, you *may* also be eligible for a Recognition Bonus from the Vermont Child Development Division. Information about this is on page 3.

### 1. Contact Information. Please type or print clearly.

Name \_\_\_\_\_

BFIS Quality Case ID<sup>1</sup>: \_\_\_\_\_

<sup>1</sup> **BFIS Quality and Credential Account:** When you work in regulated child care, you likely already have a personal account in BFIS (Bright Futures Information System). This personal account is called your Quality and Credential Account and it has your ID number. If you haven't seen your account, you can get a user name and password by going to <https://bfishelp.ahs.state.vt.us/> and fill out the short form, requesting CREDENTIALING ACCOUNT. Once the user name and password is sent to your email, you can change it to your own and then use it to log in to your BFIS Credential Account found at the BFIS homepage: <http://www.brightfutures.dcf.state.vt.us/> near the bottom of that page. A BFIS Quality and Credential account is a free, online way to document and track the training, education, credentials and coursework you have completed, and to save your Individual Professional Development Plan (IPDP). Please see the Northern Lights website <http://northernlightscdc.org> to learn more about BFIS.

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Current Workplace: \_\_\_\_\_ Location: \_\_\_\_\_

If you work in regulated child care, Licensed or Registered program Certificate # \_\_\_\_\_

### 2. Education (check one) *contact Northern Lights if you have questions about these options*

- I have successfully completed the "Fundamentals" course OR
- I have completed a college course (3 credits) that includes early child development AND completed basic specialized care, introduction to child care regulations and had one approved observation OR
- I have successfully completed the Northern Lights approved Fundamentals equivalent and portfolio review (*first* contact Northern Lights Career Development Center)

Please attach documentation showing successful completion of the education checked above. Documentation of college credit must be a transcript issued from the college or university(or a copy).

### 3. Experience

Level I requires at least **one year** of accumulated professional experience working or volunteering with children in a group (licensed, registered, legally exempt child care program or other setting). A year is a full-time or part-time commitment lasting at least 12 months in all. Please list where you accumulated the year of experience. Please print clearly.

Name of program	Name of supervisor (or if unsupervised, name of Resource Development Specialist)	Current phone number of this workplace	start date	end date
			Total number of years or months	

### 4. Individual Professional Development Plan (IPDP): *must be current within the last 3 months*

Please attach your IPDP which includes: a) self-assessment, b) goals for future professional development, c) strategies and resource, d) time line. You can find samples and blank forms on the Northern Lights website <http://northernlightscdc.org>. Contact Northern Lights if you have any questions. If you create your IPDP in your BFIS Quality & Credential Account (see the first page) you don't have to send it.

My IPDP is on my BFIS Quality and Credential Account. See my BFIS Quality Case ID #.

### 5. Statement of Truth and Accuracy

*The information you supply in this application will be verified. Applications with inaccurate or misleading information will not be processed.*

With my signature below, I attest to the truth and accuracy of all of the information provided in this application.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

### I applied for this Level certificate because (check all that apply):

- gain recognition & certificate       CDD Recognition Bonus      Other: \_\_\_\_\_  
 STARS application score       required for my job

### 6. Please send to the address on page 1:

- this completed application (all sides)  
 documentation of your education checked on page 1  
 your current IPDP (or see number 4 above)

**Good Luck on Level II and Beyond! ALSO...see page 3!**  
***You may also be eligible to receive \$100 for achieving a Level I certificate!***

If you meet the following criteria Northern Lights Career Development Center will forward your application to the **Vermont Child Development Division (CDD) for consideration of a Recognition Bonus**. Bonuses are only available for the highest level to which you are qualified. Check to see if you meet the initial CDD requirements.

- ✓ You are a Vermont resident
- ✓ The education requirement in this application is completed in the last two years
- ✓ You have worked in a Vermont regulated child care program for the past six months
- ✓ You are not a public school employee paid on the teacher salary schedule
- ✓ You plan to stay working in regulated child care for at least one year from the date of this application
- ✓ The program where you work meets regulatory requirements (see below)

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I certify that the information contained in this application is true and correct. I also certify that the following statements are true:

1. My program will comply with applicable eligibility criteria of the Child Care Development Fund including not discriminating or barring participation on the basis of race, religion, sex, color, handicap or national origin.
2. I have worked directly with children at a CDD regulated child care facility for the past six months.
3. I plan to work in regulated child care or afterschool care setting serving Vermont children for at least 1 year after receiving any grant funds from the CDD.
4. I am a Vermont resident.
5. I am not a public school employee who is paid on the teacher salary schedule for my work in the regulated care setting.
6. My program, or the program with which I am employed: (choose one)
  - Is in good regulatory standing with the Child Development Division, which means that I also certify that within the past twelve months all regulatory violations are corrected, no "Parental Notification letter/s" have been mailed and the program does not have a pattern of repeated regulatory violations with the CDD. OR
  - Has received the following violations, but no Parental Notification Letter violation in the previous 12 months. *I have attached a statement detailed the violations(s) and what I am personally doing to make sure the violations do not happen again.*

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

For Questions about the Child Development Division Recognition Bonus contact:  
Heather Mattison: 802-241-4551 or 800-649-2642 ext. 4551

<p><b>For State Use Only</b></p> <p>Date Received: _____ Invoice #: _____</p> <p>Reviewed/approved: _____ Date: _____</p> <p>Payment entered: _____ Date: _____</p> <p>License check: _____</p>	<p><b>Program Manger Approval/Denial</b></p> <p><input type="checkbox"/> Approved: \$ _____</p> <p><input type="checkbox"/> Denied</p> <p>Signature: _____</p> <p>Date: _____</p>
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