



Application for Fall 2018 MT Certified Preschool Teacher Course

(Please Print)

NAME: _____ Job Title _____

PLACE OF EMPLOYMENT: _____

HOME ADDRESS: _____ CITY: _____ ZIP: _____

PHONE (home): _____ (work) _____

E-MAIL: _____

Please circle "YES" or "NO" for each of the following statements:

I currently teach preschool-age children (3-5 years old) in a registered/licensed early childhood program, Headstart or private preschool program. If I mark "no" or "other", I need to explain:	YES	NO	Other
I currently teach in STARS to Quality program.	YES	NO	Other
I am prepared to invest 6 – 8 hours per week completing weekly quizzes, assignments, preparing to participate in class, implementing learning activities/projects in my program or classroom.	YES	NO	I need more info?
I am prepared to attend classes on Saturdays and evenings. (*Note: Please see tentative class schedule attached to the end of this	YES	NO	Other
I have Internet, a computer, a printer, a valid e-mail account that I check regularly, word processing software, and I am able to use technology to complete the coursework.	YES	NO	I need more info?
I am able to order the textbook and understand it is my responsibility to order and get the textbook.	YES	NO	I need more info?
I require special accommodations to participate in the course. If YES, please describe/ attach documentation:	YES	NO	

I am interested in (check one):

_____ 60 hours of training only (course fee \$150, waived for STAR facilities)

_____ 60 hours of training & 4 academic credits (course fee same as above, \$135 credit fee to UM-Western)

Are you currently active on the Montana Early Care and Education Practitioner Registry (circle one).

YES NO

If YES, when does your certification expire? _____ Please attach a photocopy of your Practitioner Registry Certificate or professional development record.

What is your PS number? _____

I will complete my application to the Montana Early Care and Education Practitioner Registry before the end of class so I may apply for the stipend.

YES NO

If NO, please explain your reason(s):

Please note that participants **must be current on the Practitioner Registry by the **completion** date of the course to be eligible for the Professional Development Incentive Award (PDIA) of \$500 that corresponds with this course.*

This course generally has made on-site visits throughout the course so we can all see your facility. It has been very helpful to the group to see, touch, feel, and ask questions about your facility, program and curriculum.

Do you have access to your program on Wednesday evenings?

Yes

No

Do you have permission to use your facility on Wednesdays?

Yes

No

Please attach a separate sheet of paper with your responses to the following questions. Responses may be typewritten or legibly hand written.

- 1) Please describe the extent of your education and work experience in the early childhood field. (For example, have you obtained any special certifications or degrees? What age group have you taught and for how long?)
- 2) What do you view as your greatest strengths and challenges as a preschool teacher?
- 3) Please describe what motivated you to apply for the Montana Certified Preschool Teacher Course. What do you want to get out of this course?
- 4) What are your long-term professional goals? Where do you see yourself in five years? Ten years?
- 5) Please explain your experience with technology (have you taken online courses before, you use technology daily, you have no fear of accessing technology, etc.) and what technology equipment do you have access to on a regular basis (computer, printer, digital camera/video camera, Internet connection, current software and so forth.)

Space is limited (no more than 15). Applications are due to HRDC no later than August 1, 2018, by 5pm.

Completed applications may be mailed to the address listed below or dropped off at the 3rd floor reception desk at HRDC. The application review committee will notify successful applicants of their acceptance into the course by August 15, 2017 through e-mail. Make sure your **e-mail** is current and operational!

At this time, the course fee has been waived, but please be aware that applicants will need to purchase their own text book. Ordering information for the textbook will be distributed when applicants are notified of their acceptance into the course.

Applicant Signature: _____ Date: _____

Please print and mail or deliver the applications to:

HRDC District 7

Attn: Child Care Department (Janet Mann)

PO Box 2016

Billings, MT 59103

Montana Preschool Teacher Education

Fall 2018

Proposed Schedule

Date	Time	Chapter	Location
8/29	6-10 pm	Introduction & 13	HRDC
9/5/18	6-10pm	1 & 2	HRDC
9/12/18	6-10pm	3	
9/19/18	6-10pm	4	
9/26/18	6-10pm	5	
10/3/18	6-10pm	6	
10/10/18	6-8pm	Work Night	HRDC
10/20/18	8:30-4:00	3,6,7	HRDC
10/24/18	6-10pm	8	
11/7/18	6-10pm	9	
11/8/17	6-10pm	10	
11/14/18	6-10pm	11	
11/28/18	6-8pm	Work Night	HRDC
11/29/17	6-10pm	12	
12/5/18	6-8pm	Work Night	HRDC
12/8/18	9:00-3:30pm	All projects & reports due	HRDC