

**THE EARLY CHILDHOOD ASSOCIATION OF FLORIDA
CHILD DEVELOPMENT ASSOCIATE (CDA)/EQUIVALENCY
SCHOLARSHIP APPLICATION**

The purpose of the Child Development Associate (CDA)/Equivalency Scholarship is to promote the educational and professional development of a current member of the Early Childhood Association of Florida (ECA of FL) by providing financial assistance to obtain the nationally recognized Child Development Associate (CDA), CDA Renewal or any CDA Equivalency approved by the Department of bChildren and Families. (A list of approved CDA Equivalency programs may be obtained from the Training Coordinator in any county.) The scholarship is to be used within one year. The amount of scholarship funds available for scholarships each year will be determined by the Executive Board and will be reflected in the annual budget. All checks from the Professional Recognition and Assistance (PRA) Committee will be sent to the applicant made payable to the applicable institution. There are no deadlines for this application and previous recipients are eligible.

Criteria for a CDA/Equivalency Scholarship:

The applicant must:

1. be a current member of ECA of FL and have been a member of this organization for at least one year
2. be at least 18 years old
3. live or work in Florida
4. show proof of registration in a CDA/Equivalency course
5. submit a completed application including two letters of recommendation, one from a current or former employer for whom you have worked with in the last 5 years and one from a Board member of your local ECA of FL affiliate. Each letter must have a signature and a date.
6. acknowledge receipt of the scholarship in writing
7. provide a copy of credential within 30 days of satisfactory completion of course or as soon as it is received from the institution.
8. submit the Follow-Up report form to the committee within 30 days of course completion
9. repay the PRA Fund for any monies received through the scholarship if the course is not satisfactorily completed
10. Mail completed application to ECA of FL Business Office, 3026 W. Main Street, Tampa, FL 33607, at least 60 days prior to tuition deadline.

Recipients are encouraged to attend the annual membership meeting at the ECA of FL conference to be recognized.

Statement of Non-Discrimination:

The Early Childhood Association of Florida (ECA of FL), is in compliance with Title VI of the Civil Rights Act of 1964, Title IX of the Educational Amendments Act of 1976, and the Section 504 of Rehabilitation Act of 1973 which prohibit discrimination on the basis of race, creed, color, age, national origin, gender, or handicap. Committee decisions are final.

CHECKLIST FOR APPLICANT

DOES THE APPLICATION INCLUDE:

_____ all applicant information

_____ all course information

_____ paragraphs describing your work with young children and how this course will benefit the children with whom you work

ATTACHMENTS:

_____ proof of registration at institution

_____ letter of recommendation from a Board member of local ECA of FL affiliate

_____ letter of recommendation from current or former employer

Return checklist with application to:

ECA of FL Business Office
3026 W. Main Street
Tampa, FL 33607

EARLY CHILDHOOD ASSOCIATION OF FLORIDA
CHILD DEVELOPMENT ASSOCIATE (CDA)/EQUIVALENCY
SCHOLARSHIP APPLICATION RATING SCALE

Applicant Name: _____
(The scale is based solely on the requirements of the application packet.)

For questions 1-7, mark yes or no.

- | Yes | No | |
|-------|-------|--|
| _____ | _____ | 1. The application was received at least 60 days prior to tuition deadline. |
| _____ | _____ | 2. The application form is complete. |
| _____ | _____ | 3. The applicant lives or works in Florida. |
| _____ | _____ | 4. The applicant is a current member and has been a member for at least one year. |
| _____ | _____ | 5. The application is for the Child Development Associate (CDA) credential or an approved CDA Equivalency/CDA Renewal. |
| _____ | _____ | 6. The application includes proof of registration. |
| _____ | _____ | 7. The application includes the tuition amount and payment deadline. |

For questions 8-11, use a 0-3 rating scale. Low 0 – High 3

- | | |
|-------|--|
| _____ | 8. To what degree does the local affiliate Board member's letter support the applicant as a worthy scholarship recipient? |
| _____ | 9. To what degree does the applicant's current or former employer support the applicant as a worthy scholarship recipient? |
| _____ | 10. To what degree does the applicant's Paragraph One support the applicant as a worthy scholarship recipient? |
| _____ | 11. To what degree does the applicant's Paragraph Two support the applicant as a worthy scholarship recipient? |

Figure the percentage of questions 1-7 with yes answers (e.g. 7 of 7 = 100%; 6 of 7 = 86%.)

Add the total points of questions 8-11 and figure the percentage based on a possible 12 points (e.g. 12 of 12 = 100%. 11 of 12 = 92%.)

Average the two percentages for a final score _____.

After careful review I believe this applicant _____ should _____ should not be awarded a CDA/Equivalency Scholarship.

COMMENTS: _____

In the event of multiple applications and limited funds the following may assist in a decision: quality of paragraphs; previous receipt of scholarships from ECA of FL.

Signature _____

Date _____

**CHILD DEVELOPMENT ASSOCIATE (CDA)/EQUIVALENCY
ACCEPTANCE FORM**

Required prior to issuance of tuition check.

PLEASE COMPLETE APPROPRIATE SECTION AND SIGN BELOW.

I, _____, Do _____

Accept the Early Childhood Association of Florida, Inc. Child Development Associate (CDA)/Equivalency Scholarship which has been awarded to me. I agree to complete and submit the Follow-Up Form and copy of certificate upon completion of course provided for by the scholarship. In the event I do not complete the course, I agree to repay the Professional Recognition and Assistance Fund the full amount I have received.

OR

I, _____, Do Not _____

Accept the Early Childhood Association of Florida, Inc. Child Development Associate (CDA)/Equivalency Scholarship which has been awarded to me.

Signed: _____
Signature Date

Address: _____
Number and Street or mailing address

City State Zip Code

Name of local ECA of FL Affiliate

NOTE: Mail within 7 days to:
ECA of FL
3026 W. Main Street
Tampa, FL 33607

TIME LINE for SCHOLARSHIPS
(For Committee Use Only)

Open enrollment: deadline for application: 60 days prior to school/college/university
tuition deadline.

60days prior to tuition deadline: scholarship application received by committee chair

55 days notification of application receipt sent to applicant

50 days copy of application and rating/recommendation form sent to each committee
member

35 days application rating/recommendation form returned to committee chair

25 days notification of decision sent to Executive Board contact
notification of decision sent to applicant with copy of agreement
check request form sent to Financial Officer

15 days check sent to applicant. Mailing includes form for acknowledgement of
course(s) completion.

30 days after course completion: acknowledgement of course(s) completion due.

