**Broomfield County Expanding Quality for Infants and Toddlers (EQIT)**

**Training Program APPLICATION**

 

Thank you for your interest in the Expanding Quality for Infants and Toddlers class! The following will help guide you through this application process.

This course is open to anyone who wants to learn more about best practices for infants and toddlers care. It is a 48-hour course that is full of researched and promising practice methods that are sure to impact the way you deliver service to the children you serve.

**Enrollment:** The first 10 seats are a first come, first served basis, however, remaining seats will be put on a waitlist in order to accommodate more infant and toddler teachers; these teachers will benefit most immediately and most directly from this course. Also, priority will be given to providers who live or work in Broomfield as this is a Broomfield based organization. This application must be completed in full, including the checklist and a Director’s signature (if applicable) to be considered for enrollment in the course. You must mail or upload and email your application to the address located at the bottom of this page.

**For Family Child Care Providers:** This class meets the requirement for family child care licensing if you are considering changing your license now or down the road to any other license besides the traditional 6 + 2 license.  If you are planning to apply for the Infant/Toddler license, the 3 under 2 license, or the experienced provider license, you will need this class.

**Center Providers and Director:** Directors need this class to maintain their directorship if they have not already completed ECE 111. In order to be Early Childhood Teacher Certified, Colorado requires employees to complete ECE 101 or 103 and one other ECE class. This EQ class qualifies as the one other ECE class.

**Class attendance:** Attendance to all modules are mandatory. If more than 2 modules are missed, you will be dropped from the course and will have to enroll (and pay) for another cohort. Orientation is an important time to connect and receive the necessary information for the rest of the course. We require you to attend an orientation in order to have an effective start to the EQIT course.

**Payment:** The course costs $50 due at time of registration. If you are on a waitlist, the money will be refunded in full if you do not make the class during that cohort, or can be saved and you will be first on the list for the following cohort. There are no refunds after the first class.

**Location:** All courses are held at 6995 W. 120th Avenue, the Beautiful Savior Lutheran Church in Broomfield. A map is included at the bottom of this application.

If you have any questions, please don’t hesitate to contact me by email or phone.  Also, if you know of anyone else that needs or wants this class, please feel free to forward this on to them. Thank you and look forward to your participation!

Broomfield EQIT

303-460-6810

eqit@broomfieldecc.org

**EQIT Application Checklist**

* Completed application
* Director’s signature
* Payment made
* Payment receipt printed out to accompany application
* *If needed, financial assistance form*
* *If needed, email to* [*EQIT@broomfieldecc.org*](mailto:EQIT@broomfieldecc.org) *for payment options*
* Emailed or mailed application
* Update your calendar for all the dates of the course
* Review map and location of where course is held

**EQ Expectations**

* Participants must live or work in Broomfield County. Additional participants will be considered on a space available basis.
* PDIS is an important part of being accountable to the ongoing quality of early childhood education. You must have a PDIS account in order to enroll in this course. If not, please contact the BECC Director for assistance, we will be happy to help!
* BECC learns best with your feedback. We expect you to fill out survey forms on your learning and our teaching.
* There will be no use of cell phones during class, including texting. In the case of an emergency, please take the call only after you have stepped out of the learning environment.
* In order for all participants to be able to learn without distractions, please be sure to have child care arrangements made as necessary in advance. While we all love children, they can be a distraction and disrupt others in class
* We expect that you will have all dates in your calendar so that there are no conflicts with the dates for this cohort. If more than 2 modules are missed, you will be dropped from the course.
* We expect participants to honor start times so that we can maximize the time together. Please be on time and prepared for each class.
* This course is designed to support infant and toddler teachers. We expect participants to be understanding that priority is given to teachers serving infant and toddlers.

**EQ Obligations**

* ATTENDANCE TO ALL CLASSES IS REQUIRED! - All modules must be attended in order to graduate. If you miss more than 2 modules (that is just one Saturday class), will have to take the ENTIRE 16 modules over again at another time and will not receive the certificate of EQIT completion.
* If an emergency arises, you are obligated to contact the EQ Coordinator as soon as you can. The Coordinator is Kathy Apjoke and can be reached at 303-807-7036 (phone or text).
* Bring your 3 ring binder (provided for you), something to write with, your Relate Reflect from the previous module(s), and be ready to participate. You will be provided all these materials on the first day of class.
* As a participant, you are obligated to have a minimum of 3 hours of coaching in the EQIT material with the infants and toddlers you work with. 8 hours of coaching will increase your Colorado Shines points. .
* You are obligated to have your Director sign the application and understand the coaching requirements.

**EQ Class schedule updated annually on BECC Calendar of Events** [**www.broomfieldecc.org/calendarofevents**](http://www.broomfieldecc.org/calendarofevents)

**Broomfield County Expanding Quality for Infants and Toddlers (EQIT)**

**Training Program APPLICATION**

**If you have any questions, please call Kathy Apjoke at 303-460-6810 or email at EQIT@broomfieldecc.org**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### (Street) (City) (Zip Code)

**HOME Email Address (not work email)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employer (if applicable):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Supervisor’s Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Work Address (if applicable):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street) (City) (Zip Code)

**Work phone #**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Which EQ course are you applying for?**

**\_\_\_ Summer \_\_\_\_Fall \_\_\_\_Spring**

|  |  |  |  |
| --- | --- | --- | --- |
| Highest Level of Education | Area of Study or Training Program | Year of Completion | |
|  |  | |  |

Please tell us about the children you currently care for:

|  |  |  |  |
| --- | --- | --- | --- |
| Age | Ratio | Special Needs | Other |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Any other information you’d like to share about your early childhood education experience:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your first language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you read and write English? 🗆Yes 🗆no

Please check if these statements apply to you:

\_\_\_\_\_ I care for children in another capacity. In what capacity?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ I am currently providing exempt childcare for children from only one family: Family, Friend or Neighbor care (FFN).

**Please provide the following information about the children in your care:**

This data helps us track the number of children directly impacted by attending this class. If you are support staff/floater/substitute- please count the maximum number of infants/toddlers you might have contact with in a day.

**What is the MAXIMUM total # of infants and/or toddlers you care for in the course of a day?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Family Child Care Providers:**

**License number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Accept CCCAP: Yes No**

\**Additional points in Colorado Shines if there is at least 8 hours of EQIT Coaching with the credentialed coach\**

**If you are employed by a child care center, your director must sign this application.**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give my support for the employee named on this application to participate in the Broomfield County EQIT program. I understand that the employee will receive a minimum of 3 hours of coaching onsite while infants and/or toddlers are present and agree to allow the employee to meet with the coach during working hours. ***The Center will receive additional points in Colorado Shines for a minimum of 8 hours of coaching.*** The student will be responsible for scheduling their coaching visits directly with instructors. It is the student’s responsibility to notify the staff of their coaching schedule if necessary. In addition, although EQIT coaches are onsite as a support and not in a regulatory role; we are mandated reporters. If a coach observes any situation in which the safety or welfare of children are in danger, we will notify the center that we must leave immediately and that will be reporting the incident to the proper authorities.

**Child Care Center License Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Accept CCAP:** Yes No

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Center Director Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

**There is a cost of $50.00 for the EQIT Training Class PAYABLE WITH SUBMISSION OF thIS APPLICATION.**

**no refunds will be issued after the first class.**

**if you have a financial hardship and are unable to cover some or all of the cost of the class, please contact us at 303-460-6810 or** [**EQIT@broomfieldecc.org**](mailto:EQIT@broomfieldecc.org)

**as scholarship funds might be available.**

**US Mail or EMAIL Completed AND SIGNED Application to:**

**Broomfield EQIT**

**po bOX 573**

**BROOMFIELD, CO 80038**

**pHONE: 303-460-6810**

**you will receive a confirmation email of your enrollment A MINIMUM OF 2 weeks before orientation**

**MAP OF LOCATION**

