



COMMUNITY COLLEGE  
OF RHODE ISLAND

**RI Early Childhood Education and Training Program (RIECETP)  
CDA Program Application –2022**

**INFANT/TODDLER**

**Please submit the following student and director-required documents:**

• **Student Required Documents:**

- CDA Application
- Copy of previous college transcripts
- Letter of reference from your current employer, director, educational coordinator or if you are a family childcare center a letter from one of the parents
- Student Reflection Requirement
- Signed Director and Student Agreements

• **Director Required Documents:**

- RIECETP Agreement for Directors
- Copy of the center's DHS licensing certificate
- Copy of the center's BrightStars certificate
- DHS-Child Care Assistance Program (CCAP) Provider ID Number
- Signed Director and Students Agreements

**Please Note:**

In order to be eligible for the CDA application fee, supported by T.E.A.C.H. Rhode Island, all CDA requirements must be completed within a 1-year period. The 1-year time period begins on the first scheduled day/evening of class. Requests for exceptions may be submitted to the RIECETP team for consideration. The CDA assessment scholarship pays for the majority of the cost of the CDA assessment fee and provides a bonus once the credential is earned.

***In order to be considered for this program all required documents must be submitted.  
Incomplete applications will be waitlisted.***

**Please return completed application and required documents to:**

**Lori Ryan  
Community College of Rhode Island  
Department of Human Services  
400 East Avenue  
Warwick, RI 02886**



*All RIECETP services are funded through the RI DHS Office of Child Care.*



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**REQUIRED DOCUMENT**

**RIECETP - CDA INFANT/TODDLER APPLICATION**

**PERSONAL INFORMATION - Please Print Clearly**

\_\_\_\_\_  
Name CCRI ID# or Social Security Number

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Home Phone Number Cell Phone Number

\_\_\_\_\_  
E-Mail

\_\_\_\_\_  
Date of Birth Optional  Female  Male

**Ethnicity - Optional:**

- Black or African American (Not Hispanic or Latino)
- Hispanic or Latino
- American Indian or Alaska Native (Not Hispanic or Latino)
- Asian (Not Hispanic or Latino)
- White (Not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
- Two or More Races (Not Hispanic or Latino)



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**REQUIRED DOCUMENT**

**EMPLOYMENT INFORMATION**

\_\_\_\_\_  
Child Care Center or Family Child Care Educator Program Name

\_\_\_\_\_  
Supervisor/Owner/Director's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone Number

Is your center/program?

Head Start Program

Early Head Start Program

State PreK Program

What is your center/program's BrightStars Rating? \_\_\_\_\_

What is your Title/Current Position: \_\_\_\_\_

Age group of children:  Infant/Toddler *(Must be working with Infants or Toddlers)*

How long in this position: \_\_\_\_\_

Current Salary/Wage: \_\_\_\_\_

Number of hours employed weekly *(Must be minimum of 20 hours weekly)*: \_\_\_\_\_

How long have you worked for this employer? \_\_\_\_\_

How long have you worked in the Early Childhood Education field? \_\_\_\_\_



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**REQUIRED DOCUMENT**

**EDUCATION INFORMATION**

**Level of Education**

- High School Graduate (year) \_\_\_\_\_
- GED (year) \_\_\_\_\_
- Some College - Attach Transcript
- Associates degree - Attach Transcript
- Bachelor's degree - Attach Transcript
- Master's degree - Attach Transcript

**RI Early Learning Development Standards - Check all that apply:**

- Foundations
- Curriculum
- Classrooms and Programs

**Are you registered with ECEDS - Early Care and Education Data System?**

- Yes
- No

**Are you registered with CELP - Center for Early Learning Professionals?**

- Yes
- No

**Other Certificates:**

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**REQUIRED DOCUMENT**

**STUDENT REFLECTION REQUIREMENT**

Please attach a one-page essay, typed and double-spaced answering the following question:  
(If you do not have access to a computer/printer please print clearly).

You are an early childhood educator. Please describe what influenced you to choose to work within the field of early childhood.

**Applicant's Signature**

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Signature

Date



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**REQUIRED DOCUMENT**

**RIECETP DIRECTOR'S AGREEMENT**

I, \_\_\_\_\_, hereby agree to comply with the following requirement of the  
Director/Owner

RI Early Childhood Education and Training Program (RIECETP). To allow a CDA Mentor to visit the student/students participating in the RI Early Childhood Education and Training CDA Program a minimum of one hour every three weeks. The mentoring visits will consist of observations of the student followed by a brief meeting with the mentor to discuss goals, share resources, and develop action plans as needed for the student as well as additional support to include phone calls, emails, video consults and in classroom assistance.

**Required:**

**I understand that applicants must be employed in a state licensed childcare program, are CCAP approved and BrightStars rated. I have attached copies of required documents:**

- RI Child Care License
- CCAP Provider ID Number \_\_\_\_\_
- BrightStars Rating Certificate
- I verify that the student is currently working with Infants or Toddlers

**Sponsoring Program Information**

\_\_\_\_\_  
Child Care Center Name

\_\_\_\_\_  
Director's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date



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**REQUIRED DOCUMENT**

**RIECETP CDA- T.E.A.C.H. AGREEMENT FOR DIRECTORS AND STUDENTS**

I, \_\_\_\_\_ and \_\_\_\_\_ hereby agree to the Director/Owner  
(Print Name) Student (Print Name)

RIECETP CDA - T.E.A.C.H. scholarship terms and conditions. Whereas, the sponsoring program and the student agree to pay a portion of the CDA® assessment fee (rates may vary).

Upon successful completion of the RIECETP CDA instruction, students can apply for a RI T.E.A.C.H. scholarship <http://www.teach-ri.org>. Upon approval, the student will be eligible to receive a CDA scholarship that will provide 90% of the CDA application/assessment fee (at the current rate). The student and the sponsor will each pay the remaining costs equal to 5% each.

Scholars who are awarded The Child Development Associate (CDA) Credential <https://www.cdacouncil.org> and who submit verifying documents to RI T.E.A.C.H., will be eligible to receive a \$100.00 bonus.

Please note that the Council for Professional Recognition and the RI T.E.A.C.H. scholarship program fees and reimbursements are subject to change.

\_\_\_\_\_  
Child Care Center Name

\_\_\_\_\_  
Director's Signature Date

\_\_\_\_\_  
Student's Signature Date



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**REQUIRED DOCUMENTS**

**Before mailing your application, please check that you have completed and included the following:**

- The CDA application
- Student Reflection Paper
- College transcripts – if applicable
- Include a letter of reference from your current employer, director, education coordinator, or if you are a family child care educator a letter from one of the parents.
- RIECETP Agreement for Directors
- RIECETP CDA-T.E.A.C.H. Agreement for Directors and Students
- DHS licensing certificate
- BrightStars certificate
- CCAP Provider ID Number

**Retain Pages 1, and 8 for your records**

**If you have any questions, please call or email:**

Lori Ryan, Project Coordinator  
[lryan2@ccri.edu](mailto:lryan2@ccri.edu)  
401-825-2209

**Rhode Island Early Childhood Education & Training Program -**  
<https://www.ccri.edu/hmns/RIECETP>