



To: Child Care Professional
From: Partnership for Children of Lincoln & Gaston Counties, Inc.
Date: April 29, 2021

***NOTE: CAP ON NUMBER OF ELIGIBLE CLASS HOURS**

The Individual Professional Development Program (IPDP) provides financial incentives (up to \$76 per eligible semesters hour) and recognition for child care professionals who complete college courses. The IPDP program does not require proof of family income. In an effort to better serve the professional community, we are asking for your cooperation by adhering to the guidelines and deadlines of the IPDP program.

Applicants will still submit one application and an official college transcript for the spring semesters and then another for the spring semester.

Guidelines: You may be eligible if you meet all of the following:

- You are teaching staff, family child care home providers and child care center directors who have worked at least 30 hours per week with children ages 0 through 5 years in licensed child care facilities in Lincoln and Gaston Counties during nine of the previous twelve months at time of application. (Exceptions may be granted to the 9 month requirement to allow professionals to take leave for such things as maternity leave and illness.)
- You are declaring your undergraduate/graduate major as Early Childhood Education, Child Development, Birth-Kindergarten or a closely related field (*see list below for approved college/university major listing). Professionals without a declared major may receive incentives for as many as 20 semester hours before providing the required proof of undergraduate major.

***Approved College / University Major Listing:**

AA/AAS in Child Care Administration / Child Development / Early Childhood Education / ECE-Special Education / ECE-Teacher Associate / Human Growth and Development / Special Education

BA/BS/MS/ MAT/ MED in Birth-Kindergarten / Child Care Administration / Child Development / Child Psychology / Early Childhood Education / Human Growth and Development / Special Education / Child and Family Studies with Early Childhood

- Payment will be based on documented completion of grade "B" or better in courses from regionally accredited colleges.
- * The number of eligible class hours is now capped at 6 hours per semester or per summer session. One additional hour is allowed per class for labs, practicums or pass/fail. Payments will be made for up to 66 semester hours for an associate degree, up to 130 semester hours for a bachelor's degree, and up to 200 semester hours for a master's degree. Hours paid toward a two year degree will be counted in the 130 semester hours and hours paid toward a four year degree will be counted in the 200 semester hours. Inclusive of these hours are courses that are "pre-curriculum" remedial courses. Participants will be compensated for their achievements at least semi-annually.

Deadline: Deadline for Spring 2021 semesters is as follows:

- **Application and official transcript: Monday June 7, 2021 by 12:00 noon.**
- Both the completed, signed application and an official college transcript showing completed coursework must be received by the June 7, 2021 12:00 noon deadline.
- The application will only be considered complete if both the official transcript and the completed, signed application are received by the deadline.

Be sure to meet the deadline of **Monday June 7, 2021 by 12:00 noon** for submitting your application and official transcript for Spring 2021 courses!

**Spring 2021
 Individual Professional Development Program (IPDP)
 Application Deadline for completed application:
 MONDAY June 7, 2021 by 12:00 NOON**

You must complete the application process within the deadline to be considered for the IPDP program. All questions must be answered and all signatures must be present to process your application timely.

- Name as shown on your income tax return: _____
- Mailing Address: _____
 Street or PO Box Apartment or Unit #

 City State Zip Phone Number

- Valid email address** for follow-up communication regarding your IPDP application: _____
- Your birth month and day: ____ / ____ (mm/dd) (Do not include your birth year).
- I am employed as: ____ Teacher of children ages 0-5 yrs. ____ Family child care home provider ____ Child care center director
- I have worked or will have worked at least 30 hours per week with children ages 0 through 5 years in licensed child care facilities in Lincoln or Gaston Counties during 9 of the previous 12 months as of September 7, 2020:
 ____ Yes - If Yes, please continue to next item.
 ____ No - If No, please answer the following:
 I was on leave from: ____ / ____ / ____ (mm/dd/yyyy) THROUGH ____ / ____ / ____ (mm/dd/yyyy)
 For __ maternity leave __ illness __ other (Reason : _____)
- Verification of employment: If you are an employee, you **MUST** have your facility owner, director or principal sign below. If you are the owner/director, or principal you must sign below. **I am the director, owner or principal of**

 (full legal name of the facility) and by signing below, I verify all of the above information is true and accurate.

_____ Facility ID (License) Number	_____ Signature of Director, Owner or Principal	_____ Date
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Please read and sign below. Note: Participants who are awarded more than \$600 during the calendar year will receive an IRS Form 1099. **FAILURE TO SIGN AND DATE THE SUBSTITUTE FORM W-9 WILL DELAY YOUR PAYMENT!**

SUBSTITUTE FORM W-9

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

By signing this form, I certify that under penalties of perjury:

- My Individual Taxpayer Identification Number (TIN) is correct,
- I am not subject to backup withholding* due to failure to report interest and dividend income, and
- I am a U.S. person.

* If the IRS has notified you that backup withholding applies, then you must strike out the language in the above certification that relates to underreporting.

_____ Signature	_____ Social Security Number	_____ Date
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Please continue to page 2 to complete this application.

DEADLINE: Your submission of this completed application must be received at the Partnership for Children of Lincoln & Gaston Counties, Inc. at 120 Roechling Street Dallas, NC 28034 by the following date and time to be considered for the semesters indicated below:
MONDAY June 7, 2021 by 12:00 NOON for Spring 2021 coursework.

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EDUCATION

8. I have declared my major as: _____

OR

I have not yet declared my major _____

OR

I am pursuing either a: _____ certificate _____ diploma in _____

Note: The relevancy of a degree will be determined by its ability to be accepted by NC Division of Child Development officials. Professionals receiving incentives for more than 20 semester hours must provide proof of a college major of Early Childhood Education, Child Development, Birth-Kindergarten or a closely related field.

9. Please read:

- ✓ I understand that for the 2021 Spring, I will be required to submit a complete application and must also submit an official transcript.
- ✓ If I qualify for this program and receive payments, those payments are not reimbursement for specific expenses and that:
 - Professionals without a declared major may receive incentives for as many as 20 semester hours before providing the required proof of undergraduate major.
 - Inclusive of those 20 hours, payments will be made for up to 66 semester hours for an associate degree, up to 130 semester hours for a bachelor's degree, and up to 200 semester hours for a master's degree.
 - Hours paid toward a two-year degree will be counted in the 130 semester hours and hours paid toward a four-year degree will be counted in the 200 semester hours.
- ✓ I understand that if I participated in IPDP since the 2004-2005 fiscal years, the record of payment for semester hours begins July 1, 2004.
- ✓ I understand the deadline for submitting this completed application **and that it must be received at the office of the Partnership for Children of Lincoln & Gaston Counties, Inc. at 120 Roechling Street, Dallas NC 28034.**

10. By signing below, I understand that I am applying to participate in the Individual Professional Development Program activity, agree to all terms and conditions, certify that all statements have been accurately completed, and that official college documents have been provided as required.

Applicant Signature

Date

Application Check List

We will be unable to process your application if ANY of the required documentation is missing or if any questions on the application are left unanswered.

Have you included each of the following items **REQUIRED** to process your application?

- Complete application yes no
- Official transcript yes no
(All questions **must** be answered!)
- Signed employment verification yes no
- Signed your application yes no
- Signed your substitute Form W-9 yes no

DEADLINE: Your submission of this completed application and documentation must be received at the Partnership for Children of Lincoln & Gaston Counties, Inc. at 120 Roechling Street Dallas, NC 28034 by the following date and time to be considered for the semesters:

**MONDAY June 7, 2021
by 12:00 NOON for Spring 2021 coursework**

This Space for Partnership Staff Use Only:

- Eligible: _____ Yes _____ No
- If Yes:
 - _____ Number of semester hours qualified for payment
 - _____ Amount paid
- Processed by: _____ initials _____ date
- Monitored by: _____ initials _____ date

Date Stamp Box