



T.E.A.C.H. Early Childhood® MAINE Bachelor Degree Scholarship Application

Date: _____

Name	
Address	
City, State, Zip	
County	
Phone Number	
SSN	
Email	
Date of Birth (mm/dd/yyyy)	
Gender	

Employment Status

- What is your current job title?**
- Teacher Family Child Care Educator
- Assistant Teacher Other: [Click or tap here to enter text.](#)
- Administrator
- What age groups do you teach? (check all that apply)**
- Infants (0-12 months) PreK
- Toddler (13-26 months) School Aged
- Preschool (3-5 years)

How many children are in your classroom or child care home? _____

How many hours per week do you work? _____

How many months per year do you work? _____

Beginning date of employment at current facility? _____

What is your current hourly wage? _____

- How long have you worked in the field of early childhood education?**
- Less than 2 years 6-10 years
- 2-5 years 10+ years

How Did you Hear about the T.E.A.C.H. Early Childhood Scholarship Program?

- Presentation College Website
- Mailing My Center Director Other (please specify)
- Maine Roads to Quality PDN T.E.A.C.H. Recipient [Click or tap here to enter text.](#)
- Conference/Workshop



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Ethnicity

Do you consider yourself...?

- | | | |
|---|--|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Native Hawaiian or Pacific Islander | <input type="checkbox"/> Other, two or more races |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Latinx | <input type="checkbox"/> Other |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian | |

Which languages can you speak fluently?

- | | | |
|-----------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Japanese | <input type="checkbox"/> Swahili |
| <input type="checkbox"/> Armenian | <input type="checkbox"/> Korean | <input type="checkbox"/> Tagalog |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Lao | <input type="checkbox"/> Thai |
| <input type="checkbox"/> Creole | <input type="checkbox"/> Persian | <input type="checkbox"/> Tribal: |
| <input type="checkbox"/> English | <input type="checkbox"/> Polish | <input type="checkbox"/> Urdu |
| <input type="checkbox"/> French | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Greek | <input type="checkbox"/> Russian | <input type="checkbox"/> Yiddish |
| <input type="checkbox"/> Hindi | <input type="checkbox"/> Spanish | <input type="checkbox"/> Other: |

What is your preferred language for learning? _____

Family Structure

How many people live in your household? : _____

<i>Number</i>	<i>Relationship</i>
	Parents
	Siblings
	Spouse/Partner/Significant Other
	Children
	Other

Have either of you parents or any of your brothers or sisters attended college?

- Yes
 No

DO either of your parents or any of your brothers or sisters have a college degree?

- Yes
 No



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Education Information

<i>High School</i>	<i>Dates Attended</i>	<i>Diploma?</i>	<i>GED?</i>
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>College/University</i>	<i>Dates Attended</i>	<i>Major(s)</i>	<i>Degree or Credit Hours</i>

Have you taken any college courses in the past two years?

- Yes
- No

Have you taken any Early Childhood Education credits in the past two years?

- Yes How many? _____
- No

If you currently are enrolled in college courses, what is your projected graduation date?

What of the following credentials and/or specializations do you currently hold?

- CDA: Infant/Toddler
- CDA: Preschool
- CDA: Family Child Care Home
- CDA: Home Visitor
- State Issues Credential
- Post BA (Maine Teaching license)

Are you an active member of the Maine Roads to Quality Professional Development Network Registry?

- Yes, what is your current career lattice level:
- No

Which of the following MRTQ PDN Credentials do you hold?

- Inclusion
- Infant and Toddler
- Youth Development
- Director



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Statement of Income

Job #1 Employer _____

Hours/Week _____ Earnings _____ per _____

Job #2 Employer _____

Hours/Week _____ Earnings _____ per _____

Have you applied for any other financial aid (such as Pell Grants, Smart Start Grants or student loans)?

YES

NO

Source of financial aid #1 _____

Date of application _____

Application Status: AWARDED DENIED PENDING

Source of financial aid #2 _____

Date of application _____

Application Status: AWARDED DENIED PENDING

YOUR TOTAL INCOME \$ _____

YOUR TOTAL FAMILY INCOME (your spouse included) \$ _____

****PLEASE ATTACH A COPY OF YOUR MOST RECENT PAY STUB HERE****



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Center Participation Agreement

Center Name			
Center Address (please include the County)			
Type of Center	<input type="checkbox"/> Child Care Facility	<input type="checkbox"/> Family Child Care Provider	
Director/Owners Name			
Directors Contact Info	Email:	Phone:	
License Number			
QRIS Rating	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> Currently not on the QRIS Rating		
NAEYC/NAFCC Accredited?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Category	<input type="checkbox"/> For-profit <input type="checkbox"/> Non-profit		
Funding the Program Receives	<input type="checkbox"/> Head Start <input type="checkbox"/> State PreK partnership <input type="checkbox"/> State Subsidies		

For Head Start or multi-site programs:

Is your child care program managed by another organization? Yes No

If yes, please provide the parent company name and address: [Click or tap here to enter text.](#)

The T.E.A.C.H. Early Childhood Bachelor Scholarship model offered through the Maine Association for the Education of Young Children requires the participation of each scholarship recipients employing child care center. In the event that _____ is awarded a scholarship, I understand that the center agrees to participate in the following ways:

For child care centers:

- Pay 5% of tuition for courses totaling 9-15 credits
- Provide paid release time each week for the scholarship employee including at least 2 hours per week
- Upon completion of the contract (completion of 9-15 credits), award \$250 bonus.

For family child care providers:

- Pay 10% of tuition for courses totaling 9-15 credits
- Provide release time each week

(Signature of Owner/Director)



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Education Pathways and Professional Development Goals

When would you like your scholarship to begin?

Year: Fall Spring Summer

Do you know which college/university you would like to attend? Yes No

If yes, which one: _____

If no, would you like to set up a consult call with MaineAEYC to discuss your educational pathways and college options here in Maine? Yes No

What are your professional goals? Describe how a degree will help you achieve those goals.

Is there anything else about yourself you would like us to consider while reviewing your application?

Please return signed and completed applications to:

Morgan Tolin
morgan@maineaeyc.org