

The Family Connection of St. Joseph County, Inc.

ASSESSOR APPLICATION

Name: _____

Daytime Phone Number: _____ Cell Phone Number: _____

Mailing Address: _____

City _____ State _____ Zip Code _____

Email Address: _____ Fax Number: _____

Availability

On average, how many days *per week* will you be available to conduct assessments? (On site time for assessments is generally 4 – 4.5 hrs; additional time will be needed for writing up, which can be done at your convenience) _____

Do you have any time constraints? (i.e., times of day, days of week, or months during year) Yes No

If yes, please describe: _____

Do you have regular access to reliable transportation? Yes No

Do you have regular access to a computer and the Internet? Yes No

Do you have a personal email account that can be used for assessment business? Yes No

How knowledgeable are you about the following? (*Please circle the best response.*)

	Very knowledgeable	Knowledgeable	Somewhat knowledgeable	Not knowledgeable at this time
Early childhood growth and development	1	2	3	4
Best practices in early childhood education	1	2	3	4
The HighScope curriculum	1	2	3	4
The Preschool Program Quality Assessment (PQA)	1	2	3	4
The Infant Toddler Program Quality Assessment	1	2	3	4
The Early Language & Literacy Classroom Observation (ELLCO)	1	2	3	4
PreK Classroom Assessment Scoring System (CLASS)	1	2	3	4
K – 3 Classroom Assessment Scoring System (CLASS)	1	2	3	4
Using email with attachments	1	2	3	4

Do you speak Spanish: fluently somewhat not at all

Employment Information

The chart below lists professional roles and age groups in the field of early childhood. In the spaces provided, please indicate the amount of time (in years) you have spent in each role.

	<u>Asst. Teacher</u>	<u>Teacher</u>	<u>Supervisor/Trainer</u>	<u>Administrator</u>
Infants (birth-12 months)	_____	_____	_____	_____
Toddlers (13-35months)	_____	_____	_____	_____
Preschoolers (3-5 years)	_____	_____	_____	_____
School age (kindergarten-Grade 4)	_____	_____	_____	_____

List any other experience in the early childhood field that would not be reflected in your resume.

Please list professional conferences or workshops, if any, you attended in the last year.

What is your current employment/student status? (*Place an X next to all that apply.*)

Employed full time Employed part time Not employed Full-time student Part-time student

Employment history for past 7 years (if not already provided to The Family Connection):

<i>Place of employment</i>	<i>Position</i>	<i>Director/supervisor</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you currently belong to an early childhood professional organization? Yes No

If yes, what organization/s: _____

Do you expect to be working in the field of early childhood three years from now? Yes No

If no, why? _____

Conflict of Interest

A conflict of interest is defined as any relationship between an assessor and a program that could interfere or be perceived to interfere with the assessor's ability to exercise objectivity in the assessment process. Assessors will be required to recuse themselves from conducting assessments in any program in which an assessor: is/was employed or has a close relative (spouse, parent, child) who is so employed; is or has been on the programs' Board of Directors, or has a close relative who is, or had been, such a director; has a monetary or personal interest in the outcome of the assessment; has a close personal relationship with an individual or individuals involved in the program or has had or does have a relationship that might compromise the objectivity and/or reliability of the accreditation process.

Based on the statements above, are there specific early childhood programs or schools in St. Joseph County where you cannot conduct visits? Yes No

If yes, which programs/schools? _____

Reason: _____

If you have not already provided The Family Connection with references, please fill out the following section. If you have done so, please skip this section and complete the last page.

REFERENCES

List names, addresses, and contact information of three references who can speak to your professional work (please do not list family members).

1.	Phone:
2.	Phone:
3.	Phone:

I give permission to The Family Connection to contact the references provided.
(Checking the above box serves as your electronic signature)

E-mail completed application to: famconn@sbcglobal.net

OR mail / deliver to: The Family Connection, 132 N. Lafayette Blvd., South Bend IN 46601

The Family Connection provides equal opportunity in all of our employment practices to all qualified employees and applicants without regard to race, color, religion, gender, national origin, disability, marital status, sexual orientation, gender identity, age, or any other category protected by Federal, State and local laws.