

Louisiana Pathways Scholarship Program 1800 Warrington Place Shreveport, La. 71101

> (318) 677-3163 (800) 245-8925

TO: NAFCC Scholarship Applicant

RE: NAFCC Accreditation Scholarship Process

Thank you for your interest in the Louisiana Pathways Early Child Care Career Development System Scholarship Program. NAFCC Accreditation is an indicator that family child care homes offer safe, inviting spaces and warm, nurturing care complete with educational activities designed to meet the needs and interests of all children while promoting individual development. NAFCC accreditation is recognized at Level VIII on the Louisiana Pathways Family Child Care Career Path. For more information on NAFCC Accreditation, please visit www.NAFCC.org.

The Scholarship Fund is designed to pay a large portion of the accreditation fee. To apply for a scholarship, please submit a cover letter to the Louisiana Pathways Program stating your intent to become accredited along with the enclosed application. Also include a letter of recommendation from your local Resource and Referral Agency Technical Assistant verifying your intention and commitment to improving quality care for children and a copy of your NAFCC Provider Accreditation Application. Awards will be granted on a first come – first served basis. Accreditation scholarships will be paid directly to the NAFCC.

It will be your responsibility to communicate with Pathways in writing as you become ready for accreditation. NAFCC will then be provided with written authorization to pay the scholarship amount of the accreditation fee from Pathways' account with them.

You will be notified as soon as possible by mail after a review of your application. Thank you for your commitment to high quality early child care and education in Louisiana. Contact the Louisiana Pathways Scholarship Office at (800) 245-8925 or (318) 677-3163 if you have any questions.

Have you included these items with your application?

- o Cover Letter of Intent
- o Application Form
- o LA Pathways Career Development System Enrollment Form (if not previously enrolled)
- o Letter of Recommendation
- o Copy of NAFCC Provider Accreditation Application
- o Proof of NAFCC membership



NAFCC ACCREDITATION FOR FAMILY CHILD CARE HOMES

SCHOLARSHIP APPLICATION

Name					
Social Security	Number		Date or	f Birth/	/
Tax ID Numbe	r				
Home Address		Street Address, City.	State, Zip		
			City, State, Zip		
		Address, Apt./Lot #,	City, State, Zip		
Telephone ()		E-mail		
How did you le	earn about availa	bility of NAFCC A	ecreditation Scholars	hip Funds?	
Please include a	copy of your Louisiana (been registered wit Child Care letter documenting ome a NAFCC accre		na?	
3) How many	children do you	serve?			
4) Briefly desc	cribe what high o	uality child care me	eans to you:		
*	•	pating mailing your zations of which yo	accreditation materia u are a member:	ıls?/	/
7) Do you hav of CDA and sk		If yes, enter	r Date of Issue	_//	, attach copy

8) List training, classes, and conference sessions you have participated in during the past 2-1/2 years (clock hours completed relative to early childhood): **Training Title Date Sponsor** Location Hours Earned I hereby apply for funding for a NAFCC Accreditation Fee Scholarship grant. The information on this application is accurate to the best of my knowledge. /_____/ (Date) (Signature) **Return Application to:**

LA Pathways CDS Scholarship Program NSU Child and Family Network 1800 Warrington Place Shreveport, LA 71101-4425

Toll free (800) 245-8925 Voice (318) 677-3163