## Form I

Required for Employment in Center-Based Programs

Type of Application (check one):

New to Registry
Renewal/Update
Replacement/Lost



# Hawaii Department of Human Services Early Childhood Registry

For Office Use Only:		
Received Date:		
Position at GCC:		
Position at IT:		
Position at BAS:		
Framework Level:		
Completion Date:		
Renewal Date:		

Participation in the Registry is <u>required</u> by the Department of Human Services (DHS) for employment in state licensed center-based programs. The Registry assists DHS in confirming your education and training experience to determine the position(s) you qualify for under state child care licensing rules. Once your application is processed, you will receive a Registry Certificate and be eligible for employment. If you are updating, you may receive a new Registry Certificate if your qualifications have changed. **ORIGINAL** applications only. **NO** faxed, copied, or emailed applications accepted.

Please print clearly

SECTION A: PERSONAL INFORMATION   No updates to this section  Update this section						
* Legal Name: Last: First:		MI:		Caregiver ID:		
* Social Security No:	* Social Security No:			* Gender:		
*Home Address:			Unit No:			
*City:		*State:		* <b>Z</b> ip:		
Mailing Address, if different:				Unit No:		
City:	State:		Zip:			
Email Address (optional):		Phone:		Alt Phone:		
SECTION B: IF APPLICABLE, CURRENT EARLY CHILDHOOD RELATED EMPLOYMENT INFORMATION  (TO BE COMPLETED BY THE DIRECTOR)  No updates to this section  Update this section  N/A						
Business Name: Site Name (if business has multiple sites):						
Site Mailing Address:						
City:		State:		Zip:		
Applicant's Current Position:	licant's Current Position:					
Applicant's Date of Hire: / / (MUST BE EMPLOYED) (month / day / yea				Home based ☐ School aged		
Ages worked with: Check all applicable fields    Infants-Toddlers (6wk-35 mon)    Preschool (3-5 yrs)    FCCH     School aged (K—13 yrs.)						
Director's Name:		Phone:		Email:		
* Initial all that has been completed. Required in order to process Registry application.  All employment verification has been completed for this individual (including that listed in Section D of this application). This will be used to determine if the applicant meets the DHS experience requirement.  Orientation training has been completed for this individual.						
* Director's signature:				Date:		
☐ Center Director	☐ School Principal		Human Resource Officer	□ Owner		

SECTION C: PREVIOUS EMPLOYMENT INFORMATION RELATED TO EARLY CHILDHOOD  Employment will be verified, you must list the phone number   No updates to this section  Update this section							
Business Name:				Position:			
Complete Business Address and phone:							
Avg. hours worked per week:	e of Hire:	1 1		Date of Termina	tion:	1 1	
Type of Facility: ☐ Home based ☐ Center based	☐ School age	d					
Ages worked with: ☐ Infants-Toddlers (6wk—35 mon) ☐ F	Preschool (3-5	yrs) 🗆 FC	СН		School Aged (K	(—13 yrs.)	
Business Name:				Position:			
Complete Business Address and phone:							
Avg. hours worked per week:	e of Hire:	1 1		Date of Termina	tion: /	1	
Type of Facility: ☐ Home based ☐ Center based	☐ School age	d					
Ages worked with: ☐ Infants-Toddlers (6wk —35 mon) ☐	Preschool (3-	5 yrs) 🗆 F	ССН		School Aged (	K—13 yrs.)	
Business Name:				Position:			
Complete Business Address and phone:							
Avg. hours worked per week:	e of Hire:	1 1		Date of Termina	tion: /	1	
Type of Facility: ☐ Home based ☐ Center based	☐ School age	d					
Ages worked with: ☐ Infants-Toddlers (6wk —35 mon) ☐	Preschool (3-	5 yrs) 🗆 FC	ССН		School Aged (I	<—13 yrs.)	
SECTION D: STUDENT TEACHING, INTERNSHIP	-	No updates t				s) e this section	
DIRECT EXPERIENCE WORKING WITH CHILDREN School: Date	e From:	Date To:	o tilis sect	Position:	D Option	c this section	
Type of Facility: ☐ Home based ☐ Center based	☐ School ag				Avg. number of hours per week:		
Ages worked with:   Infants-Toddlers (6wk —35 mon)	☐ Preschool (3	-5 yrs) □ M	1ixed Ages	(6wk-5yrs) □ \$	School Aged (k	(—13 yrs.)	
Job Duties:							
*INDICATE ALL LEVELS OF EDUCATION. DOCUMENTATION (DIPLOMAS, TRANSCRIPTS, & CREDENTIALS) IS REQUIRED TO COMPLETE APPLICATION.							
Send copies only, as all documents will be electronically stored and h				, ,		Focus of	
Name of School/College/University *		Status	Туре с	of Degree Earned	Date Awarded	Degree	
High School		rrently enrolled	d □ Dipl				
Community College	□ Cı	urrently enrolled ompleted	d □ Cert	ificate in ECE ciates Degree			
55.1585		rrently enrolled		ciates Degree			
University		ompleted arrently enrolled	Deg	ree			
University	I	mpleted	¹ □ Deg	ree			
If you have any of these additional credentials, please indicate below and submit documentation.							
☐ Vocational child care training course	□ Ch	☐ Child Development Associate Credential (CDA) Renewal date:					
☐ Association Montessori Internationale (AMI) Award date:	□ Mo	☐ Montessori Associate Credential (MAC) Award date:					

Application Checklist				
Copies of college transcript				
You must include documentation (i.e. college to Transcripts must include:	ranscripts or workshop/class certificates).			
* Applicant's Name				
* College / University NAME and ADDRESS Course Date, Title, Credit(s) Earned, Grade				
* Type of Degree earned, if applicable				
Copies of workshop certificates				
Copies of other applicable credentials such a	s CDA, NAFCCm Montessori, ECE certificate			
Copies of documents (marriage, divorce, etc.) if updating name changes				
Send only copies of supporting documentation, as all documents will be electronically stored and hard copies destroyed.				
$\square$ Application must include Director's signature in Section B				
* FINAL SECTION				
The information presented in this application is complete and accurate to the be other changes to report as of the date signed below. *APPLICATION MUST				
* Signature:	Date:			



SEND COMPLETED APPLICATION AND ATTACHMENTS TO: PATCH ATTN: REGISTRY 560 N. NIMITZ HWY, SUITE 218 HONOLULU, HI 96817 SHOULD YOU NEED ADDITIONAL ASSISTANCE, PLEASE CONTACT US AT:

PHONE: (808)839-1791 Email: Registry @patch-hi.org Website: www.PatchHawaii.org 

# Frequently Asked Questions

#### Q: Is the Registry requried?

There are two parts to the registry. Form I helps DHS determine the position you qualify for under state child care licensing rules. Thus, in order to work in a center-based program such as a preschool or infant/toddler center, DHS requires you to complete Form I.

#### Q: What else does the Registry offer?

A: The Registry also offers a voluntary component (Form 2) which guides you in your professional development. In addition, the Registry offers career counseling.

#### Q: What will I get from the Registry?

A: Once you complete Form I, you will get a Registry certificate which will indicate the positions you qualify for under licensing rules.

You will also receive Form 2 for the voluntary component discussed above.

It is up to you whether you want to complete this form to track your professional development.

#### Q: Do I need to renew my Registry?

A: It depends on your educational background and how you qualified for a DHS position. If you have a CDA credential or work in an infant/toddler center, you may have an expiration date. Check your Registry certificate for the expiration date.

You may also update your Registry file at any time to reflect additional classes or experiences you have received. A new Registry certificate may be issued to reflect the updated information.

You may use Form I to update your file. A new Registry certificate will be issued if you have a change in position.

### Q: Why do I need a current CDA on file?

A: If the Registry used your CDA credential to qualify you for your position, you must have a current CDA credential on file with the Registry to maintain your current position.

## Q: Why does the Registry need your Social Security number?

A: Social security numbers are required to verify educational qualifications. Your information will be treated as confidential.