

Please complete upon employment and again as needed to reflect any changes.

Rev 6/2/11

EMAA HEAD START
CHILDPLUS PERSONNEL INFORMATION

CENTER: _____ **TITLE:** _____

NAME _____
Last First Middle

MAIDEN/PREVIOUS NAME _____

SOC.SEC. # _____ - _____ - _____ **DATE OF BIRTH** ____/____/____ **GENDER:** F M

MARITAL STATUS: Divorced Legally Separated Married Single Widowed

HISPANIC: Yes No

PRIMARY LANGUAGE: English Spanish Other _____

SECOND LANGUAGE: English Spanish Other _____

PROFICIENCY IN SECOND LANGUAGE: Poor Moderate Proficient

RACE (circle all that apply) Asian Black/African American American Indian/Alaska Native
Native Hawaiian/Pacific Islander White Other _____

LIVING ADDRESS _____
Street, Apt # City State Zip

COUNTY: _____

MAILING ADDRESS: _____
Street, PO Box City State Zip

PRIMARY PHONE (____) ____ - ____ **OTHER PHONE** (____) ____ - ____

Cell Home Message Work Pager/Beeper Cell Home Message Work Pager/Beeper

EMERGENCY CONTACT: _____

RELATIONSHIP: _____ **PHONE:** (____) ____ - ____

(Continued on Back)

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EDUCATION LEVEL:(check one)

- Grade 9 or less
- Grade 10
- Grade 11
- Grade 12 (Did not Graduate)
- General Education Diploma**
- High School Graduate**
- Associate's Degree (Early Childhood Education)**
- Associate's Degree in **Related Field** with Experience *
- Baccalaureate Degree (Early Childhood Education)**
- Baccalaureate Degree in **Related Field** with Experience *
- Child Development Associate Credential**
- College or Advanced Training
- College Degree/Training Certification
- Master's Degree (Early Childhood Education)**
- Master's Degree in **Related Field** with Experience *

*(A "Related Field" is an Associate, Baccalaureate or Master degree with a program of study that included **six or more courses** in **Early Childhood Education** and/or Child Development.)

AREA OF HIGHEST DEGREE ATTAINED: _____

OTHER HEAD START COMPETENCY BASED CREDENTIAL EARNED?

HEALTH Yes No SOCIAL SERVICES Yes No

If you do not have a degree listed above, **are you enrolled in an Early Childhood Education OR Related Degree Program?** Yes No

If **yes**, check one: Associate Baccalaureate

If you are a **Family Advocate** (Family & Community Partnership Staff), are you **enrolled in Family & Community Partnership or Related Program?** Yes No

If **yes**, check one: Related Associate Degree Related Baccalaureate Degree

If **no**, check one:

- H – GED or High School Diploma
- A – Associate Degree in Related Field**
- L -- Baccalaureate Degree in Related Field**
- M – Graduate (Masters) Degree in Related Field**

** (A "Family Services Related Field" is a degree with a major in a field such as Social Work, Sociology, Psychology, Family Studies, Counseling, Family Development, Family Systems Theory or Human Resources Development.)

Are you a (circle one): Current Head Start **P**arent **F**ormer Head Start Parent **N**on Head Start Parent

Pre-School CDA STATUS: **H**as **I**n **T**raining **N**one **R**equesting CDA Assessment **W**aiver