

# 2020 Pyramid Plus Approach Incentive Program

*Sponsored by the Boulder County Child Care Assistance Program,  
the Buell Foundation and the Early Childhood Council of Boulder County*

The 2020 Pyramid Plus Approach Incentive Program may reimburse course fees (\$395) for a limited number of individuals who have completed the 18 Pyramid Plus Approach training sessions on evidence-based practices which support social emotional competence and address challenging behavior in young children, birth-5 years old.

***\*There are a limited number of incentives available.  
Incentives are awarded on a first come, first serve basis.***

## **Pyramid Plus Approach Incentive Requirements:**

- Must complete all 18 Pyramid Plus training sessions in 2020.
- Must live and/or work in Boulder County at the time the training is taken, and when applying for the incentive.
- Must presently be employed at least 20 hours per week as an ECE professional at a licensed center or family child care home.
- Must submit a completed Pyramid Plus Approach Incentive application packet along with a copy of your certificate of completion for the Pyramid Plus Approach training completed in 2020.

**Application packets will be posted on ECCBC's website beginning June 15.**

<https://www.eccbouldercounty.org/resources-for-child-care-providers/professional-development/financial-incentives/>.

**Applications must be postmarked by July 15!  
(Faxes and emailed applications are not accepted!)**

***\*There are a limited number of incentives available.  
Incentives are awarded on a first come, first serve basis!***

**For more information or questions:** Contact Emily Robbins at 720-548-3984 or [erobbins@eccbouldercounty.org](mailto:erobbins@eccbouldercounty.org)



# 2020 Pyramid Plus Approach Incentive Program Application

Sponsored by the Boulder County Child Care Assistance Program, the Buell Foundation and the Early Childhood Council of Boulder County

The 2020 Pyramid Plus Approach Incentive Program may reimburse course fees (\$395) for a limited number of individuals who have completed the 18 Pyramid Plus Approach training sessions on evidence-based practices which support social emotional competence and address challenging behavior in young children, birth-5 years old.

Beginning June 15, 2020, you will be able to apply for a Pyramid Plus Approach incentive for completing all 18 Pyramid Plus Approach sessions in 2020.

All paperwork must be submitted at one time, including a copy of your certificate of completion. The application packet needs to be **hand delivered or postmarked by July 15, 2020**. (Faxes and emailed applications are not accepted!)

***\*There are a limited number of incentives available. Incentives are awarded on a first come, first serve basis.***

**Please fill out both sides of this application – and print legibly!**

Name of Program: \_\_\_\_\_

Program Address: \_\_\_\_\_ City: \_\_\_\_\_ CO. Zip Code: \_\_\_\_\_

License Number: \_\_\_\_\_ CO Shines Level: \_\_\_\_\_

Does your program have a current CCAP fiscal agreement? \_\_\_ Yes \_\_\_ No

Full Name of Applicant: \_\_\_\_\_ Date of Application: \_\_\_\_\_

**Note:** Check will be made out in the name you enter here and will be sent to this address.

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ CO. Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Applicant Title or Position: \_\_\_\_\_ Date Employed: \_\_\_\_\_

Would you like to receive the CCR&R provider emails, which include the ECCBC Professional Development Monthly Training Calendars along with additional monthly updates? \_\_\_ Yes \_\_\_ No. Already receive \_\_\_

Email address (if different from above) \_\_\_\_\_



**Requirements.** Please check off below to verify that you and the program you are employed at meet the following requirements:

1. \_\_\_\_\_ I have completed all 18 Pyramid Plus Approach training sessions in 2020.
2. \_\_\_\_\_ I currently live and/or work in Boulder County.
3. \_\_\_\_\_ I am presently employed a minimum of 20 hours per week as an ECE professional at a licensed center or family child care home.
4. \_\_\_\_\_ I am submitting a copy of my certificate of completion for the Pyramid Plus Approach training series I completed in 2020.

I hereby attest that the information provided in this application is complete and accurate. Incomplete and/or inaccurate information will result in ineligibility for the Pyramid Plus Approach Reimbursement Program.



**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Make Sure to Include:**

- \_\_\_\_\_ Filled-out and signed application
- \_\_\_\_\_ Filled-out participant form – both sides (has a ???? on it this year)
- \_\_\_\_\_ A copy of your certificate of completion

**All paperwork must be submitted at one time, including a copy of your certificate of completion. Applications that are missing a certificate of completion, the participant form or other information will be denied.**

Mail or drop off your application packet and a copy of your certificate of completion to:

Emily Robbins  
ECCBC Professional Development Coordinator  
1285 Centaur Village Drive, Suite 200  
Lafayette, CO 80026

(Faxes and emailed applications are not accepted!)

**Must be hand delivered or postmarked by July 15, 2020!**



# Early Childhood Council of Boulder County Professional Development Program



2020/21 Participant Form

## **Part One – Basic Information/Identification** (please print)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ CO, Zip Code: \_\_\_\_\_

## **Colorado State Licensing Qualifications (Please check *all* that apply)**

Aide \_\_\_\_\_  
Early Childhood Teacher (ECT) qualified \_\_\_\_\_ Working toward ECT qualifications \_\_\_\_\_  
Infant Nursery Early Childhood Teacher (IN/ECT) qualified \_\_\_\_\_ Working toward IN/ECT qualifications \_\_\_\_\_  
Infant Nursery Supervisor (INS) qualified \_\_\_\_\_ Working toward INS qualifications \_\_\_\_\_  
Small Center Director (SCD) Qualified \_\_\_\_\_ Working toward SCD qualification \_\_\_\_\_  
Large Center Director (LCD) Qualified \_\_\_\_\_ Working toward LCD qualifications \_\_\_\_\_  
Child Development Associate (CDA) or other certificate (please name) \_\_\_\_\_  
Colorado Elementary Teacher Certification (please name) \_\_\_\_\_  
Endorsement (please name) \_\_\_\_\_

Are you familiar with the *Colorado Professional Development Information System (PDIS)*?    yes    no  
Do you have a personal account in PDIS?    yes    no  
If yes: Have you applied for the revised early childhood credential through PDIS?    yes    no  
Have you received your revised Colorado Early Childhood Credential?    yes    no    Level? \_\_\_\_\_  
Have you completed the self assessment?    yes    no  
Have you completed the Professional Development Plan?    yes    no

## **Employment**

Presently employed at: \_\_\_\_\_  
(Name of Program, School) \_\_\_\_\_ (City where employed) \_\_\_\_\_  
Total number of years employed in the early childhood field: \_\_\_\_\_ Years with current employer: \_\_\_\_\_  
How many hours are you working per week in child care? \_\_\_\_\_  
How many children are in your direct care? \_\_\_\_\_ How many children does your program serve? \_\_\_\_\_

## **Education (Please check *highest* level attained)**

High School diploma/GED \_\_\_\_\_ Bachelors degree in early childhood \_\_\_\_\_  
Some ECE college coursework \_\_\_\_\_ Masters degree in early childhood \_\_\_\_\_  
Associates degree in early childhood \_\_\_\_\_ Doctorate degree in early childhood \_\_\_\_\_  
Non ECE some college course work (please list focus) \_\_\_\_\_  
Non ECE Degree (please list degree type and focus) \_\_\_\_\_

Are you presently working toward an early childhood degree?    yes    no  
If so, what degree?    Applied \_\_\_\_\_ Associates \_\_\_\_\_ Bachelors \_\_\_\_\_ Masters \_\_\_\_\_ Other \_\_\_\_\_  
Anticipated date of degree completion? \_\_\_\_\_  
How many college credits will you take between June 2020 through May 2021? \_\_\_\_\_  
Have you taken Expanding Quality in Infant/Toddler care (EQIT)?    yes    no  
How many Colorado Shines Level 2 online courses have you taken? \_\_\_\_\_  
Have you taken Touch Points Individual Level Training?    yes    no

## **Languages Spoken Fluently**

English \_\_\_\_\_ Spanish \_\_\_\_\_ Other (please list) \_\_\_\_\_

**Part Two –**  
**Information to Assist in Designing Appropriate New Opportunities**

1. Are you receiving financial assistance for professional development?  
No      Yes      If yes, please list source \_\_\_\_\_
2. How much financial assistance do you anticipate receiving (not including the ECCBC Financial Incentive) between June 2020 and May 2021? \_\_\_\_\_
3. How important is taking college level courses in early childhood education to your future?  
(please pick one that applies the best)  
Very Important      Somewhat Important      Not at all Important      Don't Know
4. How important is the Colorado Early Childhood Credential to your future?  
(please pick the one that applies the best)  
Very Important      Somewhat Important      Not at all Important      Don't Know
5. Are you interested in attending local professional development trainings? Workshops offered on behavior management, child development, teaching strategies, etc. These earn clock hours toward relicensing but do not earn college credits. (please pick the one that applies the best)  
Very Interested      Somewhat Interested      Not at all Interested
6. How important is attending professional development training workshops to you?  
(please pick the one that applies the best)  
Very Important      Somewhat Important      Not at all Important
7. What are the barriers to you in taking college courses? (please pick all that apply)  
Time (*not offered at the right time of day/night*)      Interest (*not important enough*)  
Timing (*maybe at another stage of life*)      Money (*can't afford it*)  
Ability (*don't think I am smart enough*)      Child Care (*not available*)  
Transportation (*can't get to the trainings*)      Offerings are not advanced enough  
No Incentive (*participation won't advance professional status or salary*)  
Other \_\_\_\_\_      No Barriers exist for me at this time.
8. What are the barriers which prevent you from attending local professional development training workshops? (please pick all that apply)  
Time (*not offered at the right time of day/night*)      Interest (*not important enough*)  
Timing (*maybe at another stage of life*)      Money (*can't afford it*)  
Ability (*don't think I am smart enough*)      Child Care (*not available*)  
Transportation (*can't get to the trainings*)      Trainings are not advanced enough  
No Incentive (*participation won't advance professional status or salary*)  
Other \_\_\_\_\_      No Barriers exist for me at this time.

If you would like to receive the CCR&R provider emails, which include the ECCBC Professional Development Monthly Training Calendars along with additional monthly updates, please print your email address:

\_\_\_\_\_



Building brighter futures together.

*Thank you! Please return this form to:*  
Emily Robbins  
c/o Early Childhood Council of Boulder County  
1285 Centaur Village Drive, Suite 200  
Lafayette, CO 80026

