



## Texas Director Credential Candidate Application/Agreement

This course meets the education requirements to become a Director of a licensed child care center or a Primary Caregiver of a licensed child care home.

### Director Credential Program eligibility and acceptance requirements:

- Minimum age 21 years old.
- High School diploma or equivalent.
- Current CPR & First Aid certification.
- Proof of at least two (2) years work experience in a licensed child care or early education setting.
- Clear Criminal Background Check documentation.

### Application

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ (MM/DD/YY)  
Home Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Primary Phone#: \_\_\_\_\_ Alt. Phone#: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

### Education

☐ High School Diploma/GED Date Received: \_\_\_\_\_  
☐ Degree: \_\_\_\_\_ College/University \_\_\_\_\_  
☐ CDA: Date of Expiration \_\_\_\_\_

### Experience

Years of Experience:  
☐ 1-2 Years ☐ 3-5 Years ☐ 5 Years or More

### Program Type:

☐ Licensed Center ☐ Head Start/Early Head Start ☐ Licensed Home ☐ Registered Home

### Employment:

Busniss Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ - To \_\_\_\_\_



### **Agreement**

I certify that the information provided above is true and accurate to the best of my knowledge. I agree to abide by and follow the rules and requirements of the program. I understand and acknowledge that in order to be awarded the Director Credential recognized by the state of Texas, I must satisfactorily complete all requirements of the program.

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

Name(Print): \_\_\_\_\_

### **How do I apply to the program and earn my Director Credential?**

Complete and submit this Application Form along with the following required documentation:

- Proof of High School diploma/GED
- Current CPR/First Aid certification
- Copy of Driver's License or ID
- Work Verification form to prove 2 years of work experience
- Copy of College Degree or CDA (if applicable)
- Copy of clear criminal background check

(IF YOU DO NOT have any piece of the above required documentation you may still attend our course but, the state will have to give you a waiver for the parts you are missing to be a licensed director. Please submit your waiver in place of any missing documentation.)

Successfully complete the program (all assignments and assessments) with a cumulative passing score of 80%.

The Texas Director's Credential with ChildCareEd is an approved day-care administrator's credential issued by a professional organization and approved by Licensing. Once completed, you will receive a certificate as proof you have completed the training program which is valid for two years. The Texas Health and Human Services requires that once you have completed the training:

You will need to be designated as the director or primary caregiver at an operation and complete the following forms (available at <https://www.hhs.texas.gov/regulations/forms>) and submit them to your licensing representative along with supporting documentation:

- Form 2911 Governing Body Designation
- Form 2760 Controlling person, and
- Form 2982 Personal History Statement



### **How do I renew my Director Credential?**

In order to renew your credential you must upload the following pre-requisite documentation to the ChildCareEd website:

- Completed Renewal Application submitted at least 90 days prior to your current credential expiration date.
- Copy of your current Child-Care Center Director's Certificate
- Documentation that you have worked at least 4800 hours in a licensed child care facility performing administrative duties (letter on official letterhead from a supervisor will fulfill this requirement)
- Copy of a current CPR & First Aid certification
- Copy of the most recent licensing inspection for your child care facility.

Upon approval, the Credential will be renewed for two years.

### **Refund Policy**

No refunds are given once a registration payment has been made. The exceptions to this policy are as follows:

- Unique circumstances may occur that would not allow the student to participate. A 50% courtesy refund may be applied to a future class date for the same class.
- If a class is canceled by H&H, then a full refund will be given, or a second time and date will be offered.
- Payments need to be made in full prior to the end of class and successful completion in order for a certificate to be issued.
- Refunds in the form of credits may be given when certain emergencies arise.

### **Credential Denial**

Credential award will be denied under the following conditions:

Failure to achieve 80% passing score and/or complete all program requirements, no current CPR/FA certification, failed background check, failure to submit all required documentation for program acceptance, unresolved adverse actions from Child Care Licensing.

### **Credential Suspension**

Credential holder is subject to reprimand under the following conditions: Repeated deficiencies by Child Care Licensing. Credential holder must submit in writing proof of resolution of any issues/deficiencies cited by Child Care Licensing within 30 days of notification from H&H. If written proof of resolution is not submitted within the 30 days Credential will be suspended for 30 days. At the end of the 30-day suspension, if credential holder has not submitted required written response, Credential will be revoked. Credential holder will be notified via email on all required steps to address infractions.

**Credential Revocation**

Credential will be revoked under the following conditions: Any person found to have criminal convictions, abuse neglect findings, unresolved adverse actions from Child Care Licensing, and/or failure to renew credential within 30 days of expiration. Persons will be notified via email of revocation of their credential. Persons will have 30 days from the date of notification to respond/contest in writing to address the reason for revocation. The response will be reviewed by H&H and a decision regarding revocation will be provided within 45 days after receipt.



## EMPLOYMENT VERIFICATION LETTER

Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_

**RE: Employment Verification for \_\_\_\_\_ [Employee's Name]**

To whom it may concern:

Please accept this letter as confirmation that \_\_\_\_\_ [Name of Employee] was employed with \_\_\_\_\_ [Employer Name] from \_\_\_\_\_ [Employee Start Date] to \_\_\_\_\_ [Employee End Date].

\_\_\_\_\_ [Name of Employee] held the Title of \_\_\_\_\_ and worked on a ☐ Full-Time ☐ Part-Time basis of \_\_\_\_\_ hours per week.

If you have any questions or require further information, please don't hesitate to contact me at \_\_\_\_\_ [Employer Phone Number].

Sincerely yours,

**Signature** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

Employer Title: \_\_\_\_\_