Employee Name:	,			
Gender:	Race:			
∐ Male	American Indian/Alasl	can Native		
[] Female	☐ Asian			
	☐ Black	Lie	spanic:	
Current or Former	☐ Multi-racial/Biracial	- ni:	spanic.	
Head Start Parent:	☐ Pacific Islander	<u>.</u> □	Yes 🖸 No	
☐ Yes	☐ White			
□ No	☐ Other (Please Specify)			
(.)				
	7			
Primary Language:		Emergency Contact:		
rimial y Language.				
Other Language:		Name:		
Proficiency: little moderate proficient				
r folicities. B little	- moderate - promise	Relationship:		
Other Language:				
Other Language: Proficiency: I little I moderate I proficient		Phone:		
,	- Inductate B promotor			
Education		CDA (Tarabas Assista	ats Only)	
☐ High School Graduate		(Teacher Assistants Only)		
☐ CDA		☐ Has CDA ☐ In CDA Training Program		
☐ Technical Certificate		☐ In CDA Trainin	ng Program	
☐ Associates				
☐ Bachelors				
☐ Masters	-			
☐ Other:	_		1	
ECE or Related Degree		FCP or Related I	Degree	
(Lead Teachers; Coach/Mentor)		(Family Services Staff Only)		
□ No Degree		☐ Related Degree		
☐ ECE Degree		☐ Associates		
Associates		☐ Bachelors		
Bachelors		☐ Advanced		
Advanced			☐ Credential, Certification, or License	
Related Field with Experience		☐ Enrolled in an FCP Credential, Certification or		
Associates		Related Degree Program		
☐ Associates ☐ Bachelors			S .	
Advanced				
			1	
☐ Teach for America	Polated Degrae Program		1	
☐ Enrolled in an ECE or	Related Degree Program Auto Insurance	e on File:		
		e on rue.	Hep. B Vaccine	
PC Approval Date	☐ Yes ☐ No		nep. b vaccine	
	DL#		☐ Yes ☐ No	
		4 4	LE LES LINO	
	Expiration:			