



## SCHOLARSHIP GUIDELINES AND AGREEMENT

Smart Start Child Care Association offers scholarships for college courses toward certification or a degree in the area of child development through funds provided by the Heart of Texas Workforce Board. The primary partners in this project are McLennan Community College (MCC), Hill and Navarro Community Colleges.

Smart Start will fund one course for the summer 2008 semester. The first four courses funded must be taken in the field of child development and pertain to the job requirements of the applicant's current position. All courses must meet the requirements for certification or a degree in the area of child development.

To be eligible for funding, an employee must be employed at a childcare center that is a comprehensive member in good standing of the Smart Start Child Care Association, and have been employed there for a minimum of three months. If an employee resigns while taking a class, the director of the center will notify Smart Start immediately.

All applications must be returned by May 12<sup>th</sup> by 5PM at the Heart of Texas Workforce Center, Smart Start Office located at 1416 S. New Road. All information required on the applications must be completed to be considered. Awards will be made only to those who follow the guidelines and scholarship criteria. They will be considered in the order and time they are received.

The approximate cost of one course plus books and fees ranges from \$200 to \$300.00. Therefore, Smart Start will use this range, as the funding criteria. The participant will pay a fee of \$35.00 per semester. This fee will not be refundable under any circumstance. This is due at the mandatory registration meeting scheduled for **May 14, 2008 from 5-7 PM.** Check or money order is required.

Priority will be given to students who have already completed courses in child development and who are not eligible for funding from other sources. Students already receiving financial aid will not be considered.

A high school transcript is required of all students who are registering for the first time. Please bring the transcript with you to registration on May 14.

The applicant agrees to attend classes and to complete all assignments, including lab hours.

The director of the center where the scholarship recipient is employed agrees to assist the applicants in all aspects of attending class, completing assignments and fulfilling required lab hours. Students who withdraw from a course funded by Smart Start will be required to reimburse Smart Start 50% of the cost of the course including books and fees. Students who withdraw may be deemed ineligible for consideration for future scholarships.

I authorize MCC to release my course grades to Smart Start for all courses paid for with Smart Start scholarship funds.

- If I receive an “Incomplete”, I agree to complete the course before receiving funding assistance for another course.
- If I receive a grade below a “C”, I understand that I will not be eligible for further financial assistance from Smart Start until I pass that course (with at least a “C”) at my own expense.

**I understand that a criminal history check will be required of me to participate in on campus lab associated with the class I choose.**

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**I have read, understand and agree to abide by all the guidelines as written above.**

Child Care Center

Name \_\_\_\_\_

\_\_\_\_\_  
Employee’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director’s Signature

\_\_\_\_\_  
Date

Please return both pages of this signed agreement with the application and retain a copy of both for your records.



## Scholarship Application

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Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_

City Zip

**Please complete the following:**

Current employer: \_\_\_\_\_ Date of hire: \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_

City Zip

Describe child care center?

\_\_\_\_ Faith Based Center      \_\_\_\_ Privately owned      \_\_\_\_ College/University  
\_\_\_\_ Head Start              \_\_\_\_ Public school              \_\_\_\_ Other: \_\_\_\_\_

Age group you currently work with \_\_\_\_\_

Are you currently pursuing: \_\_\_\_ Child Development Associate (CDA)  
\_\_\_\_ Child Development/ Administrator Certificate  
\_\_\_\_ Associate Degree in Child Development

How many courses have you completed to date that have been funded by the following:

Smart Start Child Care Association: \_\_\_\_ Child Care Services: \_\_\_\_ WAEYC: \_\_\_\_  
Train Our Teachers (TOT) Grant: \_\_\_\_ Federal Financial Aid: \_\_\_\_

I agree to provide a copy of my transcript from the college/university to which I will be attending.

**Briefly state your career goals and why you are applying for a scholarship with Smart Start Child Care Association.**

I certify that all statements made on this application are true. I give permission for authorized representatives of the Smart Start Child Care Association to verify any and all information listed above

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date