



Montgomery County Child Care Resource & Referral Center

Early Childhood Quality Enhancement Award

MONTGOMERY COLLEGE SCHOLARSHIP

Available to all early childhood educators working full time (40 hours per week) in a licensed child care program or registered family child care home in Montgomery County. Our scholarship fund will assist child care workers who pursue an Associate's Degree with a declared major in Early Childhood Education at Montgomery College. **The maximum award will cover \$618 for a three-credit approved course, \$721 for a four-credit course, or \$824 for a five-credit approved course (includes student fees) at Montgomery College during the spring and fall semester.** Priority is given to students already enrolled at Montgomery College, other completed applications are processed first come, first serve, while funding is available. *Please note, this is a fillable application, however you must print, sign and return with original signature (e-signatures will not be accepted).*

Complete application in its entirety and return to:
Paulina Alvarado, Quality Enhancement Coordinator



1401 Rockville Pike, Rockville, MD 20852



earlychildhoodservices@montgomerycountymd.gov



240-777-4497

Fall Deadline: _____

Spring Deadline: _____

APPLICANT INFORMATION

-To be completed by applicant-

Name: _____ Date: _____

Address: _____

Phone: _____ ☐ cell ☐ home ☐ work

Email: _____

Gender: ☐ Female ☐ Male Date of Birth: _____

Race: ☐ White ☐ Black/African American ☐ Asian

☐ American Indian or
Alaskan Native ☐ Native Hawaiian or
Pacific Islander

Ethnicity: Are you of Hispanic or Latino Origin? ☐ Yes ☐ No

In order to qualify for this scholarship, applicant must hold the following:

You currently hold a valid MD Child Care Credential ☐ Yes Level: _____

Your program is currently enrolled in MD EXCELS ☐ Yes Level: _____



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SCHOLARSHIP INFORMATION

-To be completed by applicant-

Semester: ☐ Fall ☐ Spring Montgomery College ID # _____

Course: _____ Course # _____ Credits _____

Course: _____ Course # _____ Credits _____

Are you a returning student? ☐ No ☐ Yes

Have you declared ECE as your major? ☐ No ☐ Yes

Which degree are you pursuing? ☐ A.A. ☐ A.A.T.

Have you completed the application for FAFSA? ☐ No ☐ Yes

Have you applied for State Scholarship funding through the
MSDE Professional Development Fund? ☐ No ☐ Yes

Do you already hold a degree from a college/university? ☐ No ☐ Yes

Degree Area: _____ ☐ A.A. ☐ BA/BS ☐ MA/MS ☐ PhD

PROGRAM & EMPLOYMENT VERIFICATION

-To be completed by Center Director or Family Child Care owner-

Center/Family Child Care Name: _____

License/Registration Number: _____

Address: _____

Director/Family Child Care Name: _____

Director's Phone: _____ Director's Email: _____

Position held by applicant: _____ Age Group: _____

Hire Date: _____ Total # work hours per week: _____

Does your program accept child care subsidy as a form of payment
(CCS, WPA, Military)? ☐ Yes ☐ No

If yes, how many children are you currently serving with subsidy? _____

Does your program accept children with special needs (IEP/IFSP)? ☐ Yes ☐ No

If yes, how many children are you currently serving that are
receiving IFSP/IEP services? _____



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I hereby affirm that the above person is currently working 40-hours a week at the above mentioned site. I support and recommend this person to continue their professional development through this scholarship award process. I understand that the scholarship award status is based on the candidate's eligibility requirements and successful completion of coursework. I understand that the scholarship award can be denied or revoked in the case of default by candidate.

Director/Owner Signature: _____ Date: _____

STATEMENT OF COMMITMENT

-To be completed by applicant-

I affirm that all the information on this application is true and accurate. I understand that any false statements on this application will result in application rejection. I certify that I am employed in child care full time (40 hours per week). I understand that I must meet the eligibility criteria required by the college and maintain at least a 2.0 GPA. I also certify that I am pursuing an Associate in Arts degree with a declared major in Early Childhood Education or an Associates in Arts-Transfer towards a 4-year degree in Early Childhood Education. By accepting this award, I understand that I am making a commitment to continue working in child care in Montgomery County for at least one year from the date of course completion or reimbursement. If this commitment is not fulfilled I will be subject to repayment of scholarship award. I also understand that I will be excluded from accessing future scholarship funds by failing to successfully pass the course or by dropping a college course without proper notification. As a condition of program participation I commit to serve as a mentor for others. I also commit to continuing my participation in the Maryland Child Care Credential and renewing my credential for one year upon continuation of scholarship support. In addition, I commit to keep all my information current and accurate.

Applicant Signature: _____ Date: _____

Office Use

Date Received: _____	<input type="checkbox"/> Email	<input type="checkbox"/> Fax	<input type="checkbox"/> Mail
Approved: <input type="checkbox"/> Yes	Award: _____		
<input type="checkbox"/> No	Reason: _____		