

*Increasing the Number Competence and Resources
of Early Interventionists in Areas of Shortage*

Application for Funding

Name: _____ Email: _____

Street: _____

City: _____ State: _____ Zip code: _____ Home

phone: () _____ Work phone: () _____

Current position: _____ Place of Employment: _____

How long have you been in this position? _____ Full time or Part time? _____

Please list the contact information for three professional references

Name: _____ Position: _____

Email: _____ Phone number: _____

Name: _____ Position: _____

Email: _____ Phone number: _____

Name: _____ Position: _____

Email: _____ Phone number: _____

Professional Statement: attach a two-page professional summary of your career path, your future plans, and how the IECE certificate will support these plans.

Have you completed any of the following courses at the GRADUATE level? (Not as part of a bachelor's degree)
 Advanced Child Development Infant Development Introduction to Special Education

Please read the following statement and check whether you agree to these conditions of funding:

If selected for funding, would you be willing to take 2 courses per semester, including summers? Yes No

If I accept funding, I understand that I must complete 3 practicum experiences consisting of 100 clock hours each in an infant/toddler, preschool, and Kindergarten setting. Yes No

If I accept funding, I understand that I will have to repay all funding received if for any reason I do not complete the program and provide early childhood special education services for two years for every year funded. I have read the regulations on my service obligation: <http://www.serviceobligations.ed.gov/ProgramRegs2006.cfm>. Yes No

Signature of Applicant

Date

Return completed application for funding to
Lee Ann Jung
University of Kentucky
124 Taylor Education Building
Lexington, KY 40506-0001