



QUALIFICATIONS APPLICATION  
SCHOOL-AGE CENTERS



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Home/cell phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Work phone: \_\_\_\_\_

\_\_\_\_\_ E-Mail: \_\_\_\_\_

Current or Perspective Employer: \_\_\_\_\_

Select **one** position you wish to apply for along with how you meet the education requirement. Please refer to Delaware rules for all requirements to qualify for each position. Documentation of age, education and experience must accompany this form and be sent to address on back. Please send copies of training certificates, originals will not be returned. Official transcripts (in a sealed envelope from college/university) are required for college coursework or degrees. **No faxes will be accepted.**

\_\_\_\_\_ **SCHOOL-AGE INTERN** (Rule #77.4)  
\_\_\_\_\_ Successful completion of at least 15 clock hours of quality assured training in school age care  
**OR**  
\_\_\_\_\_ 3 college credits in School-Age/ECE

\_\_\_\_\_ **SCHOOL-AGE SITE ASSISTANT** (Rule #77.3)  
\_\_\_\_\_ High school/equivalent-Name/location: \_\_\_\_\_ year graduated: \_\_\_\_\_  
**AND** (check appropriate one)  
\_\_\_\_\_ 3 college credits in recreation, elementary education, school-age care, or school-age administration  
\_\_\_\_\_ 15 clock hours of quality-assured training related to needs of school-age children

\_\_\_\_\_ **SCHOOL-AGE SITE COORDINATOR** (Rule #77.2)  
\_\_\_\_\_ 12 college credits in recreation, elementary education, school-age care, or school-age administration

\_\_\_\_\_ **SCHOOL-AGE ADMINISTRATOR** (Rule #77.1)  
\_\_\_\_\_ An Associate or Bachelor's degree from a regionally accredited college or university with 15 college credits with at least 3 credits in child development/learning, environment/curriculum, social-emotional development, observation/assessment; and one three credit elective in school age

**SPECIALTY TRAINING** (Rule #27.6)

Administration

Infant and/or toddler development

School-Age Care

**CAREER LATTICE** (check if you are only applying for a career lattice increase)

I understand that information regarding my qualification level may be shared.

I hereby swear/affirm that the information provided in this document is a full and complete disclosure of the facts required, and the information is true and correct to the best of my knowledge.

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

\_\_\_\_\_  
Date

*Note: 27.3.2 In the event that false qualifications documentation is submitted to the OCCL or its designee, the applicant will be notified that the applicant will be unable to submit new or updated documentation for one year.*

**Send completed packet to the following address:**

DE Department of Education/Delaware First  
John G. Townsend Building  
401 Federal Street, Suite #2  
Dover, DE 19901-3639

**Completed packet must include the following documents:**

- Signed Qualifications Application for School-Age
- Verification of Experience Form (signed by employer)
- Photocopy of driver’s license or other identification documenting proof of age
- Copies of training certificates to document training
- Official college transcripts and/or documentation of degree (in a sealed envelope from college/university) *If sending transcript separately it must be marked “Attn: Delaware First”*