



Child and Youth Care Worker
CERTIFICATION INSTITUTE of Texas

Application for Entry Level Certification
(Please type or print)

Date Received:
Payment Attached:
(For Office Use Only)

Name: SS#: Date:

Work address: Phone: ( )

City: State: Zip:

Home address: Phone: ( )

City: State: Zip:

Please check the appropriate boxes and attach documentation of the information requested. Thank you!

CERTIFICATION FEE: (Please document method of payment.)

- Certification fee attached. Make check or money order for \$50.00 payable to the "Certification Institute".
Certification fee paid: (Where) (Date) Many people pay for certification at the time of testing. Please indicate where and when you made payment. The fee for testing includes payment for processing of the application.

EDUCATION AND EXPERIENCE REQUIREMENT:

- 2080 hours (one year) of experience in direct youth/child care work. Please submit a resume or complete the form provided below. (If submitting a resume, please be sure to include the phone numbers of the agencies and addresses to facilitate verification.) OR
Completion of an approved one year Certificate Program in Child/Youth Care or Child Development Associate Program. (Please submit a copy of your college transcript indicating completion of the certificate program, OR a copy of the certificate issued upon graduation, OR a copy of your Child Development Associate certificate.)

Employment History of Applicant (Please begin with the most recent job and list all jobs relevant to determining your eligibility for Entry Level Certification. You are documenting direct-line work with youth. If you need additional space, please attach additional pages as needed.)

Agency Name: Phone: ( )

Address: Street City State Zip

Position (title):

Full-time

Length of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  Part-time  
Total Number of Work Hours: \_\_\_\_\_  
Agency Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Position (title): \_\_\_\_\_  
 Full-time

Length of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  Part-time  
Total Number of Work Hours: \_\_\_\_\_

Agency Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Position (title): \_\_\_\_\_  
 Full-time

Length of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  Part-time  
Total Number of Work Hours: \_\_\_\_\_

Agency Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Position (title): \_\_\_\_\_  
 Full-time

Length of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  Part-time  
Total Number of Work Hours: \_\_\_\_\_

Total number of hours worked as a direct-line child or youth care practitioner? \_\_\_\_\_  
(The total number of hours must be at least 2080.)

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**PROFESSIONAL EDUCATION REQUIREMENT:**

- Current certification in CPR** (attach a front and back copy of a current CPR card issued in the name of the applicant. CPR training must be up-dated at least annually to be considered 'current' and must be conducted by a person certified to provide CPR training. The card must show the date the course was completed or the date that the card expires on, and be signed by a person certified to provide CPR training.) **AND**
- Current certification in First Aid** (attach a front and back copy of a current First Aid card issued in the name of the applicant. The Institute will also accept a certificate of completion of a First Aid course that includes the signature and credentials of the instructor and the date the course was completed. First Aid training must be conducted by a Red Cross instructor or a licensed/certified health professional. First Aid training must be up-dated at least every three (3) years to be considered 'current' or must be up-dated as indicated on the card or certificate.) **AND**

- Current certification in approved Behavior Management, Crisis Prevention/Intervention or Child Guidance** *(attach a copy of a letter or certificate of completion from a Behavior Management, Guidance, or Crisis Prevention/Intervention training. This can include, but is not limited to, PMAB, CPI, Handle with Care, Mandt System or Crisis Prevention. At this time there are no standards for the minimum number of clock hours that must be included in training. The letter or certificate must be issued to the applicant, and must include the date of training, number of hours included, and the signature and credentials of the instructor. The training must have been received within one (1) year of applying for certification. The Institute is currently developing more in-depth standards relating to this certification requirement.)* **AND**
- Completion of 3 hours of approved training in code of ethics** *(attach a copy of the certificate issued by the Texas Youth and Child Care Worker Association that shows you have successfully completed the three (3) hour 'Ethics for Child and Youth Care Practitioners' training. Currently this is the only ethics course that meets the Certification Institute's standards for ethics training. If you don't have a copy of your certificate, contact the TYCCWA state office for assistance. Completion of a college level ethics course that includes the 'Standards for Practice of North American Child and Youth Care Professionals' will be accepted with submission of a transcript indicating a passing grade.)*

**PROFESSIONAL REFERENCES:**

*(The easiest way to meet this requirement is to copy the last page of the 'Application for Entry Level Certification' form titled 'Entry Level Professional Reference Form'. This form clearly delineates the requirements for references. Applicants must submit at least three references, one of which must be from a supervisor. If you are not currently employed in child care or have not been employed in your position for a minimum of six (6) months, the Institute will accept a reference from your previous supervisor who has worked with you for at least six (6) months. Other written references may be accepted but should clearly indicate that the applicant is qualified for Entry Level Certification, the length of time the applicant has been known to the reference provider, the name, address, and telephone number of the reference provider, and any reservations.)*

- two (2) letters of reference from Certified CYC Practitioners and one (1) letter from a current or former supervisor recommending applicant for certification; **OR**
- three (3) letters of reference from co-workers you have known for 6 months or more and one (1) letter of reference from current or former supervisor recommending applicant for certification;

**MEMBERSHIP:**

*(Attach a copy of your membership card or certificate from one (1) of the organizations listed below. The certificate or card must be issued in the applicant's name and must indicate that the membership is current.)*

- Texas Youth and Child Care Worker Association (TYCCWA); **OR**
- Texas Juvenile Detention Association (TJDA); **OR**
- Texas Association for the Education of Young Children (TAEYC); **OR**
- Texas Network of Youth Services (TNOYS); **OR**
- Texas Alliance for School-age Care (TASAC).

**CERTIFICATION EXAM:**

*(Applicants must have taken and passed the Entry Level Certification Exam with a score of 75% or better. This can be documented by sending in a copy of the letter you received telling you the score you received on the exam)*

*or you can simply fill in the spaces below documenting when you tested and your score. The Institute maintains records on testing conducted and can verify your participation in the testing program.)*

Test results letter attached; **OR**

Testing Date: \_\_\_\_\_ Score: \_\_\_\_\_

*Return completed form to: Certification Institute, 405 West 28<sup>th</sup> Street #120, Bryan, Texas 77803*  
*For additional information: Voice (979) 775-0883 or Fax (979) 775-0893* Revised (6/2001)

