**Infant/Toddler Specialization Checklist - WV Child Care Credential**

* I have received the WV Child Care General Credential. Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I have completed the required courses and have attached my WV STARS Transcript with required courses highlighted.
  + West Virginia Infant/Toddler Professional Development Program Caregiver Modules I/T (with proof of learning)
  + WV/T Professional Development Program: Safe Sleep in Child Care

**OR**

* + WVI/T-R Professional Development Program: Caregiver Modules

**AND**

* + Building Strong Foundations: Supporting Infants and Toddlers through the West Virginia Early Learning Standards Framework: Infant/Toddler
  + I/T Positive Behavior Intervention Support
  + Supporting Breastfeeding in Child Care
* I have attended a statewide, regional, and/or national with a minimum of six hours completed within the last 12 months.
  + Name of Conference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + Date of Conference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I have documented a total of 18 months of employment history working with children in the 0 to 35 month age group in a licensed child care center, regulated family child care facility or as a regulated family child care provider. Employment Verification Letter or current Provider Service Agreement (PSA) need to be completed and submitted with application.
* I have a current membership in the WV Infant/Toddler Mental Health Association.
* Date of Expiration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I assure that all information submitted is true and accurate to the best of my knowledge.

Signature of applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| For Office Use Only  Date Application Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Application Reviewed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Approved \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Denied \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Reason for Denial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Email Sent to TCR for Bonus and WV STARS notification \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Email Sent to DHHR for Certificate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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