

Education Report

General Information:

Name: _____

Today's Date: _____

Center: _____

Position: _____

Circle Highest Level of Certification/Education: SPII/SPI; Initial Provisional BK; BS/BA; AA;

CDA; High School Diploma; Other: _____

Current Educational Status:

Name of University/College Attending: _____

Working Toward (i.e. licensure/degree type) _____

2nd Summer Session through Fall Semester (July 1st through Dec)

Name of Class	Grade Received	No. of Credits Earned

Spring (Jan-May)

Name of Class	Grade Received	No. of Credits Earned

1st Summer Session (Courses completed prior to June 30)

Name of Class	Grade Received	No. of Credits Earned

Please check one of the following and attach transcripts, grade reports

- _____ Staff member is working with the Early Educator Support, Licensure and Professional Development Unit (EESLPD) on Initial Provisional License
- _____ Staff member has successfully completed, with a "C" or better, a minimum of six semester hours toward full qualification.
- _____ Staff member has not successfully completed, with a "C" or better, a minimum of six semester hours (Below describe plans for meeting requirement by June 30)

NC Pre-K Staff Signature: _____

Date: _____

Administrator Signature: _____

Date: _____

Updated July 2019

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Smart Start network 