

**EARLY CHILDHOOD EDUCATION
REGISTERED APPRENTICESHIP APPLICATION**

Southwest Child Care Resources
5250 Lovers Lane, Suite LL120
Portage, MI 49002
(269) 349-3296

NOTE: Applications must be submitted and approved before beginning the apprenticeship

IDENTIFYING INFORMATION

Please Print:

Full Name _____ Date of Birth ____/____/____
Last Name First Name Middle Name MM DD YYYY

Mailing Address _____
Street Address City State Zip Code

Phone _____ Alternate Phone Number _____ Email _____
(xxx) xxx-xxxx (xxx) xxx-xxxx

Gender Male Female Prefer not to disclose

Veteran Status

Race American Indian or Alaska Native

Ethnicity

Veteran

Black or African American

Native Hawaiian or Other Pacific Islander

Hispanic or Latino

Non-Veteran

Asian American

Non-Hispanic or Latino

White

CURRENT EMPLOYMENT

Current Child Care Employer _____

Mailing Address _____
Street Address City State Zip Code

Director's Name _____ Phone _____
(xxx) xxx-xxxx

EDUCATION

Do you have a High School Diploma or a GED Yes No

Do you have Professional Development Hours Yes No (Submit proof of Professional Development Hours)?

Current Hourly Wage _____

Credential Type

Please Choose One: Preschool Infant and Toddler Family Child Care

Signature _____ Date _____

Please complete and save application and email to apprenticeship@ccr4kids.org