

Complete Pathway to Career Initiative Participant Application

Thank you for your interest in participating in the Complete Pathway to Career Initiative. This application helps Rise for baby and family understand your educational goals, support needs, and interest in advancing within the early childhood education field.

Applicant Information

- Full Name:
- Mailing Address:
- Phone Number:
- Email Address:
- Current Employer/Program:
- Current Position/Role:
- How long have you worked in early childhood education?

Education & Degree Pathway

What degree or credential are you currently pursuing?

CDA Associate Degree Bachelor's Degree Other:

Name of college/program:

Current enrollment status:

Not yet enrolled Part-time Full-time

Approximately how many credits have you completed?

Expected graduation/completion date:

Briefly describe where you are in your educational journey:

Short Answer Questions

1. Why are you interested in advancing your education in early childhood education?

2. Describe a time when you received feedback that helped you grow professionally or personally.

3. What strengths do you bring to your work with young children and families?

4. What challenges or barriers have made it difficult to continue your education?

5. What are your long-term goals in the early childhood field?

Mentorship & Professional Growth

Please indicate your level of agreement with the following statements:

I am open to receiving feedback and coaching:

Strongly Agree Agree Neutral Disagree

I am willing to participate in mentorship meetings and professional learning opportunities.

Strongly Agree Agree Neutral Disagree

I am comfortable reflecting on my professional strengths and areas for growth.

Strongly Agree Agree Neutral Disagree

What type of support would be most helpful to you?

- Mentorship/coaching
- Academic advising
- Financial support
- Time management support
- Peer support/networking
- Other: _____

Financial Support Request

Are you requesting financial support through this initiative? Yes No

If yes, what type of support are you requesting?

- Tuition assistance
- Books/supplies
- CDA application/testing fees
- Transportation assistance
- Other: _____

Have you completed the FAFSA or applied for financial aid?

Yes No Planning to apply

Have you applied for scholarships or other educational funding?

Yes No

If yes, please briefly describe the funding received or anticipated:

Estimated out-of-pocket educational costs remaining after financial aid or scholarships:
\$ _____

Please briefly explain the financial gap or need you are hoping this initiative can help cover:

Additional Information

Is there anything else you would like us to know about your goals, experiences, or support needs?

Certification

I certify that the information provided in this application is accurate to the best of my knowledge.

Applicant Signature: _____

Date: _____