

### EVALUATION OF TEACHER QUALIFICATIONS

The courses listed below have been reviewed and verified by the Department of Social Services, Community Care Licensing Division, as meeting the requirements for child care center teachers in the California Code of Regulations, Title 22, Division 12. The original of this form, along with copies of transcripts or other relevant documentation, must be kept in the teacher's personnel file at the licensed center. This form is transferable to other centers and will be accepted by all District Offices.

I. PERSONAL INFORMATION	COMPONENTS	FACILITY NUMBER
TEACHER : ROBERT UNGAR	<input checked="" type="checkbox"/> Preschool	300600196
FACILITY: CHRIST LUTHERAN CHILD CARE CENTER	Infant	
ADDRESS : 2715 E. LA VETA AVE., ORANGE, CA 92869	<input checked="" type="checkbox"/> School-Age	300614040
	Mildly Ill Child	

II. EDUCATION/EXPERIENCE	
Children's Center Permit (Copy attached)	Child Development Associate Credential (Copy attached.)
Regional Occupational Program Certificate (Copy attached)	<input checked="" type="checkbox"/> Coursework only and six months of experience (Copy of transcripts attached.)

III. QUALIFYING POSTSECONDARY COURSES			
COURSEWORK IN CD/ECE	COURSE #	UNITS (S/Q)	COLLEGE/UNIVERSITY
CHILD/HUMAN GROWTH AND DEV.			
CHILD, FAMILY AND COMMUNITY PROGRAM/CURRICULUM			
SCHOOL-AGE	PE 178A	1	Golden West College
OTHER: INFANT, SCHOOL-AGE, ETC. SCHOOL-AGE	PSYC 200	4	University of Southern California
SCHOOL-AGE	MUS 190	3	CSU. Long Beach
TOTAL:			
ADDITIONAL UNITS REQUIRED:			

IV. QUALIFYING EXPERIENCE					
FROM	TO	HOURS PER DAY	POSITION(S)	EMPLOYER(S)/ADDRESS(ES)	TOTAL: MO/DAYNA
03/2016	Present		School-Age Teacher	Christ Lutheran Child Care Ctr.	

V. OTHER APPLICABLE EDUCATION/COURSES (based on statutory/regulatory changes) (Backup documentation attached.)		
COURSE TITLE	DATE COMPLETED	VERIFIED BY
CPR		
First Aid		
Others Training Hours 120 = 6 units	10/2015 - 10/2016	
Training hours with The Childs-Pace		

Was an exception granted? No

Based on the completion of the requirements identified above, this employee is approved as a :

Fully qualified preschool teacher	<u>  IA  </u>	_____	_____
	LPA'S SIGNATURE/PRINTED NAME AND DISTRICT OFFICE	DATE	
Fully qualified infant teacher	<u>  IVA  </u>	_____	_____
	LPA'S SIGNATURE/PRINTED NAME AND DISTRICT OFFICE	DATE	
<input checked="" type="checkbox"/> Fully qualified school-age teacher	<u>  Judy Hanson Judy Hanson  </u>	<u>  DOOG  </u>	<u>  3-16-2016  </u>
	LPA'S SIGNATURE/PRINTED NAME AND DISTRICT OFFICE	DATE	
Fully qualified mildly ill child teacher	<u>  IVA  </u>	_____	_____
	LPA'S SIGNATURE/PRINTED NAME AND DISTRICT OFFICE	DATE	