



Child Care Resource Network (CCRN) is pleased to offer \$55 scholarship assistance to support Southern Oregon University's (SOU) Early Childhood Development Workshops taken for college credit.

SOU's series of Early Childhood Development Workshops may be taken for training hours or for college credit.

- If taken for training hours the Workshop cost is \$50 and earns 8 Set One or Set Two hours, depending on the workshop
- If taken for college credit, there is an additional cost of \$55 and a follow-up activity requirement to earn 1 SOU ED 399 college credit (10 hours). Total cost for credit is \$105 (\$50 workshop fee+ \$55 for 1 credit).

Child Care Resource Network will pay the \$55 cost difference between taking a workshop for training hours or for credit. Applicant will register and pay a total of \$105 to SOU to take the workshop for credit, and on successful completion, CCRN will reimburse \$55 to the participant.

Scholarship Guidelines:

- Applicant must be an early learning professional in Jackson or Josephine counties
- Scholarships are awarded only for SOU Early Childhood Development Workshops
- Scholarships will provide assistance for the credit portion of the Workshops. Applicant will pay class and credit fees in advance and will be reimbursed for the credit portion after grades are posted and transcript is submitted to CCRN to verify successful completion
- Applicant will be notified by phone or email of approval or denial
- Scholarship assistance is dependent on availability of funds; priority may be given to QRIS participating programs and/or programs serving families receiving DHS support.

To register and pay for workshops contact Kayla Rapet at SOU: (541) 552-8436 or rapetk1@sou.edu

Please fill out the information below. Information may be used to prioritize scholarship approval.

Name: _____ Phone #: _____ Email: _____

Address: _____ City: _____ Zip: _____

Work Place Name & Address: _____

Status: Center Reg. Family Cert. Family Recorded Exempt Accept DHS QRIS

Position: Owner Director Teacher Assistant Other _____

\$55 reimbursement requested for the following workshop(s):

Workshop Title	Location	Date
1. _____		
2. _____		
3. _____		

Signature: _____ Date: _____

Return by mail, fax or email to: Child Care Resource Network / Southern Oregon ESD, 101 N. Grape Street, Medford OR 97501 / FAX 541-770-8095 / Email ccrn@soesd.k12.or.us. Contact CCRN with any questions, 541-776-8590 x1118

Office use: Approved Denied Amt \$ _____ Funding Source OCC 2100 Notification Date _____ Transcript Rec'd Ck Requested _____