Illinois Director Credential

Work & Practical Experience in Early Childhood/ School-Age Administration—Verification Form Family Child Care Providers

Family Child Care Providers (FCCP) must complete this form to verify administrative experience for the Illinois Director Credential. Please follow the steps below:

Step 1: Include copies of your Illinois child care license for the years of experience to be counted.

Step 2: Please have two families with children in your program complete the Proof of Care Form.

Step 3: Please include:

- Two copies of your most recent ***employee(s)*** pay stub or two copies of the most recent employee time sheet.

AND

- Copy of ***employee(s)*** W-2 or 1099 form(s).

Personal Information

Participant Name:_____

License Name:_____

Address:_____ Apt. #:_____

City:_____ State:_____ Zip Code:_____

Ages of Children Served: ☐ 0–3 ☐ 3–5 ☐ 5–12

Hours per week: _____ x Weeks per year: _____ x # of years: _____ = Total Hours: _____

Participant Signature: _____ **Date:**_____

I verify that I have read this paragraph and that all information provided is true and accurate. By signing above, I understand that INCCRRA will use my signature as authorization to verify any information and documents I have submitted, including the request for additional documentation. I understand that an individual determined to have submitted fraudulent, altered, or false documentation or information will be banned from INCCRRA administered programs for a time period to be determined by the Illinois Department of Early Childhood (IDEC). Any benefit received by or paid on behalf of the individual as a result of fraudulent, altered, or false documentation or information must be reimbursed to INCCRRA by the individual as determined by IDEC.