EARLY CHILDHOOD EDUCATION AND CARE CONDITIONAL RENEWAL EVALUATION Form EC310



Applicant's Full Legal Name:_____

Type of Classroom:_____

Positions:_____

Directors/Principals: Use this list to guide observations and evaluation of the working environment and daily practices of applicant in assigned work setting. Send completed form with the certification application to the local Conference Office of Education.

The Physical Environment

- 1. Is the physical layout of the room appropriate for the age of children and activities maintained within?
- 2. Does the physical environment appeal to the child; is it personable, comfortable and inviting to the age of children inhabiting it on a daily basis?
- 3. Is the physical space neat and organized with child-friendly equipment and materials?
- 4. Is Jesus and Heaven portrayed for the enjoyment of children and adults moving in and out of the room?

The Health and Safety

- 5. Is the room kept clean, sanitary, healthy and safe on a daily basis?
- 6. Is cleanliness of the room and children apparent to the parents and administration?

The Curricula

- 7. Are Bible lessons, spiritual values and character growth activities infused throughout the everyday program?
- 8. Does the applicant follow standards/benchmarks, objectives and goals when planning learning experiences and activities?
- 9. Are options incorporated to accommodate individual children's needs and learning styles?
- 10. Is conscious effort made to use developmentally appropriate materials and equipment at all times following the philosophy of SDA education and care for young children?

The Relationships

- 11. Does applicant practice regular and positive communication with parents of enrolled children?
- 12. Does the applicant maintain team spirit and a collaborative working relationship with peers and administration?

I have observed the working environment and practice of the above named applicant and employee of

Name of ECP or School

We have conferred together regarding commendations and recommendations for her/his professional development. I recommend this applicant for certification.

Director/Principal signature

Date