



Education Report

General Information:			
Name:	Today's Date:	Today's Date:	
Center:	Position:		
Circle Highest Level of Certification/Education: SPII/SPI; Initia		A;	
CDA; High School Diploma; Other:			
Current Educational Status: Name of University/College Attending:			
Working Toward (i.e. licensure/degree type)			
2 nd Summer Session through Fall Se	emester (July 1 st through Dec)		
Name of Class	Grade Received	No. of Credits Earned	
Spring (Jan-			
Name of Class	Grade Received	No. of Credits Earned	
1 st Summer Session (Courses co			
Name of Class	Grade Received	No. of Credits Earned	
Please check one of the following and	attach transcripts, grade rep	orts	
 Staff member is working with the Early Educator Supporting on Initial Provisional License Staff member has successfully completed, with a "C" or be semester hours toward full qualification. 		Development Unit (EESLPD	
Staff member has not successfully completed, with a "C" describe plans for meeting requirement by June 30)	or better, a minimum of six s	emester hours (Below	
NC Pre-K Staff Signature:		Date:	
Administrator Signature:		Date:	

Updated July 2019

