



## CENTER PARTICIPATION AGREEMENT

### Associate Degree Scholarship Model

This agreement must be completed by the center director for teachers, and the center owner or board chairperson for directors. *(Please check one to indicate which applicable option you prefer)*

T.E.A.C.H. Early Childhood® COLORADO, a college scholarship program for early childhood professionals, requires the participation of each scholarship recipient’s employing child care center. In the event that employee \_\_\_\_\_ is awarded a scholarship I understand that the center agrees to participate in the following ways:

- Pay 5% of the cost of tuition on a per semester basis for attendance at a community or 4-year college. The center will be responsible for collecting the recipient’s 5% and for paying the college the full 10%. The center will be responsible for paying the college within 30 days of receipt of an invoice.
- Provide up to 2 hours of paid release time per week while employee is enrolled in classes. T.E.A.C.H. Early Childhood® COLORADO will reimburse up to 2 hours at \$10.00 an hour per week student is attending classes.

Option One

Pay the employee a \$325 bonus at the completion of the 12-month work agreement. The scholarship recipient will remain an employee of the center for twelve months after successful completion of 9-18 credits. The credits must be completed within one calendar year.

Option Two

Give the employee a 2% raise at the completion of the 12-month work agreement. This raise is to be above and beyond any other expected raise.

Name of Center: \_\_\_\_\_

Center Mailing Address: \_\_\_\_\_

County: \_\_\_\_\_ License #: \_\_\_\_\_ License Type: \_\_\_\_\_

Center Phone #: \_\_\_\_\_ Email address (required): \_\_\_\_\_

\_\_\_\_\_  
Print Name of Authorized Signer (Director/Owner)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Authorized Signer (Director/Owner)

\_\_\_\_\_  
Date