School-Age Accreditation Request Form

A New Pilot Program from the NAEYC Academy

PURPOSE

For a limited time, NAEYC is piloting an optional program that allows currently accredited programs to pursue accreditation for the school-age component of their program.

INSTRUCTIONS

Use this form to request a School Age Accreditation assessment. The school-age component of your program will receive an observational site visit by NAEYC assessors. Learn more at www.naeyc.org/academy/accredited/schoolagepilot.

ELIGIBILITY REQUIREMENTS FOR PILOT PROGRAM

Any NAEYC-Accredited program is eligible to participate in this pilot if it has one or more groups that serve school-age children that are eligible to be assessed by NAEYC. Answer the following questions to demonstrate your program's eligibility for this pilot program.

Check all of the boxes below to verify that your program is eligible to participate in the School-Age Accreditation pilot program.

☐ My program is currently NAEYC-Accredited.

In order to be assessed by NAEYC, both of the following conditions must be true:

☐ The group(s) including school-age children operate before- and/or after-school

AND

☐ The majority of the children in each of the group(s) included in this request are age 8 or younger.

SCHOOL-AGE ACCREDITATION REQUEST FORM SUBMISSION DATES

Use the information below to plan your program's submission of the School-Age Accreditation Request Form, and prepare your program for a School-Age Accreditation Visit. The date in which the School-Age Accreditation Request Form is submitted determines the six-month School-Age Accreditation Visit Window during which the School-Age Accreditation Visit will occur. School-Age Accreditation Request Forms will be accepted on a rolling basis, so programs may submit the form at any time.

Please check the submission cycle for which you are applying and note the corresponding School-Age Accreditation Visit Window.

School-Age Accreditation Request Form Submission	School-Age Accreditation Visit Window
☐ January 31	February 1 – July 31
☐ May 31	June 1 – November 30
☐ September 30	October 1 – March 31

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Section 1: PROGRAM INFORMATION

Program Identification

Program Name:
Legal name to appear on all correspondence and official documents from NAEYC, including the NAEYC Accreditation Certificate.

Program ID#:

Designated Program Administrator		Secondary Contact	
*The **Designated Program Administrator** is responsible for receiving written correspondence regarding the program's accreditation and can update NAEYC with changes to program information. See Clarification on Program Administrator for more information.*		*The **Secondary Contact** will be copied on all correspondence regarding the program's accreditation and can update NAEYC with changes to program information.*	
Name:		Name:	
Title:		Title:	
Phone:	Fax:	Phone:	Fax:
Email:		Email:	

Additional Contacts

***Additional Contacts** are authorized to receive confidential programmatic information from NAEYC. Programs may name up to three (3) additional contacts.*

Name:	Name:	Name:
Title:	Title:	Title:

Multiple Programs within the Same Facility

NAEYC Accreditation is granted to the overall program, and will not be granted to individual classrooms within a program. For the School-Age Accreditation Pilot Program, all eligible groups that include school-age children must be reported and may be observed during a site visit. ***This includes groups within the program that operate during the summer.***
A group can only be excluded from a program's NAEYC Accreditation if it is part of a separate program that has a separate public identity. If necessary, you may attach an additional page to provide a description of separate programs that operate within your program's facility.

Security Clearance

Is a security clearance required upon entry to the program?
☐ No ☐ Yes – If yes, provide the name and phone number for the proper authority outside of your program below.

If yes, a security clearance must be given prior to an announced or unannounced site visit, please provide the name and phone number for the proper authority outside of your program.

Name:	Email:
Relationship to program:	Phone:

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Section 1: PROGRAM INFORMATION Continued

Program Address

Contact information will be posted on the NAEYC website when a program achieves NAEYC Accreditation.

Street Address:		Suite/dept/floor:
City:	State:	Zip:
County:	Country:	
Phone:	Fax:	
Email:	Website:	

Mailing Address

To be used for written correspondence to the program.

☐ Same as program address

Street Address:		Suite/dept/floor:
City:	State:	Zip:
County:	Country:	
Email:	Phone:	

Billing Address

To be used for invoices sent to the program.

☐ Same as program address ☐ Same as mailing address

Attention:
This individual must also be listed as the Designated Program Administrator, Secondary Contact, or an Additional Contact on page 1.

Organization Name (if different than program name):

Street Address:		Suite/dept/floor:
City:	State:	Zip:
County:	Country:	
Email:	Phone:	Fax:

Shipping Address

To be used for the shipment of all NAEYC Accreditation Materials.

☐ Same as program address ☐ Same as mailing address ☐ Same as billing address

Street Address: *No P.O. Boxes accepted*		Suite/dept/floor:
City:	State:	Zip:
County:	Country:	
Email:	Phone:	

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Section 2: PROGRAM SCHEDULE

Program Closures and Exclusion Dates

☐ My program operates 12 months/year.	**OR**	☐ My program operates less than 12 months/year. • The program begins serving children on • The program ends on

NAEYC will not conduct site visits on weekends or Federal Holidays. Place an X over all additional dates on which your program will be closed. If your program is closed for less than two additional days in any month, you may also place an X over two Exclusion Dates within those months. Exclusion Dates are additional dates a program chooses when a visit may not be conducted.

Month	Dates Closed	Year
Select the current month	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 ☐ Program is closed for the entire month	20
	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 ☐ Check if program is closed for the entire month	20
	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 ☐ Check if program is closed for the entire month	20
	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 ☐ Check if program is closed for the entire month	20
	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 ☐ Check if program is closed for the entire month	20
	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 ☐ Check if program is closed for the entire month	20
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	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 ☐ Check if program is closed for the entire month	20

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Section 2: PROGRAM SCHEDULE Continued

Hours of Operation

Indicate the days of the week your entire program operates and time of day your program opens and closes each day.

☐ Program is open 24 hours/day, 7 days a week

Days Open	☐ Monday	☐ Tuesday	☐ Wednesday	☐ Thursday	☐ Friday
Opening Time	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.
Closing Time	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.	: ☐ a.m. ☐ p.m.

Additional Information

Are there any dates on which your program's school-age group(s) will be off site for a field trip?

☐ No ☐ Yes – If yes, please indicate the dates and group(s) below:

Are there any dates on which your program expands its hours for school-age care in response to the school-age children's primary school not being in session?

☐ No ☐ Yes – If yes, please indicate the dates and times below:

Note any other **special circumstances** regarding your program's schedule that may affect the scheduling of a school-age accreditation visit.

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Section 3: GROUP INFORMATION

Summary of Groups Already Included in Your Program's Accreditation

Use the section below to report on all eligible groups included in your program's current accreditation. This up-to-date information will help NAEYC determine how many school-age groups will be assessed during the school-age accreditation visit. Refer to Clarification on Groups to determine how many groups your program serves and the age categories that apply to each group.
Note: If any of the groups reported below include any school-age children, they may also be reported as school-age groups using Section 4: School Age Group Information.

Age Categories	# of Part Day Groups *(meet for <5 hrs)*	# of Full Day Groups *(meet for ≥5 hrs)*	Total # of Groups
Infant Group(s)			
Toddler/Two Group(s)			
Preschool Group(s)			
Kindergarten Group(s)			
Mixed Age Group(s)			
		TOTAL of all groups:	

Satellite Locations

Only complete this section if any of the groups are housed in a satellite location.

A program with satellite location must meet the following criteria:

1. Have no more than 2 satellite locations
2. Location is within 5 mile radius
3. The satellite location/s enroll 60 or fewer children
4. One Program Administration
5. One Budget
6. One Public Identity

Satellite Site Address 1

Street Address:		Suite/dept/floor:
City:	State:	Zip:

Satellite Site Address 2

Street Address:		Suite/dept/floor:
City:	State:	Zip:

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Section 4: SCHOOL-AGE GROUP INFORMATION

Please read the following definition of school-age groups to determine how many school-age groups your program serves.

Early childhood programs often provide care to school-age children that complements their time enrolled in school. Schools are not typically open during early morning and late afternoon/evening hours, and may be out of session for days, weeks or months. Many early childhood programs provide care during such out-of-school time to meet the needs of families in their communities. To address the specific type of care provided to school-age children, NAEYC defines school-age groups differently than it defines groups that include children from birth through kindergarten.

For the purposes of NAEYC Accreditation, a group is a defined set of children that are assigned to a specific teacher or teaching team.

A group that serves school-age children is eligible for assessment through NAEYC's school-age child care accreditation pilot program if:

- most of the children present in the group, most of the time, are age 8 or younger
  AND
- the group provides care during out-of-school time.

The following rules should be considered when identifying a program's school-age groups.

Reporting Before- and After-School Groups as a Single Group
A program may choose to report school-age groups that meet for both before-care and after-care as a single group. To determine if before- and after-school groups should be reported as a single group or as two separate groups, the program should consider BOTH of the following factors.

- If the before-school and after-school care groups operate in the same space (i.e. classroom) that provides a similar experience to children in the morning and afternoon/evening, the program may decide to define before- and after-school care as a single group.
- If the children who participate in before-school care do not change drastically from the children who participate in after-school care, the program may decide to define before- and after-school care as a single group.

NAEYC provides the program with the flexibility to determine whether or not before-school and after-school groups should be reported separately or as a single group.

Two-Hour Rule
A school-age group must be in operation for at least two hours throughout the course of the day to be eligible for NAEYC accreditation. The total amount of time a group is in operation does not have to be continuous. For example, if before- and after-school care is defined as a single group, the amount of time the group is in operation is a combined total of time the group is in operation for before-school care and after-school care.

One Consecutive Hour Rule
A school-age group must be in operation for at least one consecutive hour to be eligible for NAEYC accreditation. This is necessary so that an NAEYC Assessor may conduct a full, uninterrupted observation of the group.

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Section 4: SCHOOL-AGE GROUP INFORMATION Continued

Complete the following page with information about each of the eligible school-age groups your program serves. Make a copy of the following page and complete for additional school-age groups served at your program.

Group Name

Group Address

This group is located at:

- ☐ The main facility listed as the site address
- ☐ Satellite Site 1
- ☐ Satellite Site 2

Age Categories Served by this Group

Check all that apply:

- ☒ School-age (Most of the children in the group, most of the time, must be school-age children age 8 or younger.)
- ☐ Kindergarten
- ☐ Preschool
- ☐ Toddler/Two
- ☐ Infant

Teaching Staff Members Present in this Group

NAEYC defines teaching staff by the roles they fill within the group. Please refer to the Definition of Teaching Staff for more information.

Number of teachers:
Number of assistant teacher-teacher aides:

Number of other adults (if any):
How often are they present?
What is their role?

Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide	Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide
Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide	Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide
Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide	Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide
Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide	Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide
Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide	Teaching Staff Name: ☐ Teacher ☐ Teacher Assistant/Aide

Group Characteristics

Do any children enrolled in this group have any of the following diagnosed special needs?
If yes, please indicate the number of children.

- ☐ Orthopedic handicaps:
- ☐ Speech & language:
- ☐ Neurological disorders:
- ☐ Down Syndrome:
- ☐ Learning disabilities:
- ☐ ADHD:
- ☐ Hearing impairment:
- ☐ Autism, spectrum disorders:
- ☐ Mentally disabled/Developmentally Delayed:
- ☐ Maintenance care diseases (diabetes, HIV):
- ☐ Visual impairment:
- ☐ Behavioral:
- ☐ Other, specify:

Do any children in this group speak languages other than English? ☐ No ☐ Yes – The children speak:

If yes, how much time do the children in this group typically speak a language other than English?

- ☐ all of the time
- ☐ most of the time
- ☐ sometimes
- ☐ never

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Section 4: SCHOOL-AGE GROUP INFORMATION Continued

Group Name:

Example: Begin/End Time(s)	AM Arrival: 6:15 AM Departure: 7:30 ☐ N/A – No before-school care provided	PM Arrival: 3:30 PM Departure: 6:45 ☐ N/A – No after-school care provided
If applicable, indicate times during which swimming classes take place: : to : . ☒ N/A – No swim class		

Monday

☐ Group does not meet on Mondays.

Begin/End Time(s)	AM Arrival: : AM Departure: : ☐ N/A – No before-school care provided	PM Arrival: : PM Departure: : ☐ N/A – No after-school care provided
If applicable, indicate times during which swimming classes take place: : to : . ☐ N/A – No swim class		

☐ **This group's schedule is the same Monday through Friday. If checked, skip to Section 5: Rights and Responsibilities.**

Tuesday

☐ Group does not meet on Tuesdays.

Begin/End Time(s)	AM Arrival: : AM Departure: : ☐ N/A – No before-school care provided	PM Arrival: : PM Departure: : ☐ N/A – No after-school care provided
If applicable, indicate times during which swimming classes take place: : to : . ☐ N/A – No swim class		

Wednesday

☐ Group does not meet on Wednesdays.

Begin/End Time(s)	AM Arrival: : AM Departure: : ☐ N/A – No before-school care provided	PM Arrival: : PM Departure: : ☐ N/A – No after-school care provided
If applicable, indicate times during which swimming classes take place: : to : . ☐ N/A – No swim class		

Thursday

☐ Group does not meet on Thursdays.

Begin/End Time(s)	AM Arrival: : AM Departure: : ☐ N/A – No before-school care provided	PM Arrival: : PM Departure: : ☐ N/A – No after-school care provided
If applicable, indicate times during which swimming classes take place: : to : . ☐ N/A – No swim class		

Friday

☐ Group does not meet on Fridays.

Begin/End Time(s)	AM Arrival: : AM Departure: : ☐ N/A – No before-school care provided	PM Arrival: : PM Departure: : ☐ N/A – No after-school care provided
If applicable, indicate times during which swimming classes take place: : to : . ☐ N/A – No swim class		

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Section 5: RIGHTS AND RESPONSIBILITIES

Program Rights

Right: To receive professional and timely support from NAEYC.
- Phone - (800) 424-2460, option 3, option 1. Monday - Friday, 9:00 AM to 5:00 PM ET
- Email - accreditation.information@naeyc.org
- Accreditation Program Support Resources

Right: To receive information from the NAEYC Academy regarding updates on the NAEYC Accreditation system, policies, and procedures.
- Monthly Accreditation e-Updates emailed to primary and secondary contacts provided to NAEYC.
- Bi-Annual Accreditation Updates mailed to program mailing address provided to NAEYC.

Right: To access current, accurate information about the NAEYC Accreditation process and the NAEYC Early Childhood Program Standards and Accreditation Criteria, including related assessment tools and resources.
- NAEYC Academy Website
- TORCH

Right: To provide feedback to the NAEYC regarding the NAEYC Accreditation process and the NAEYC Early Childhood Program Standards and Accreditation Criteria.
- Submit Feedback on the Accreditation System
- Submit feedback on the accreditation criteria via TORCH Criteria Feedback and TORCH Discussions

Right: To withdraw from the NAEYC Accreditation process at any time.

Program Responsibilities

Responsibility: To understand the NAEYC Accreditation process and access the most current versions of the NAEYC Early Childhood Program Standards and Accreditation Criteria and related assessment tools and resources.
- For information about the NAEYC Accreditation process, visit the NAEYC Academy Website frequently and read monthly Accreditation e-Updates and bi-annual Accreditation Updates.
- For current versions of the NAEYC Early Childhood Program Standards and Accreditation Criteria and related assessment tools and resources, visit TORCH.

Responsibility: To Update NAEYC of programmatic changes and critical incidents according to the appropriate timeframes.
- Report major programmatic changes within 30 days using the Self Report form.
- Notify NAEYC of critical incidents that may impact program quality status within 72 hours using the 72 Hour Notification form.
- Inform NAEYC of updates to contact information for the primary and secondary contact of your program to ensure open communication between the program and NAEYC. Changes to contact information should be reported as soon as possible with the Self Report form.

Responsibility: To notify NAEYC immediately if Candidacy Requirements are no longer met. Failure to meet Candidacy Requirements may affect a program's maintain status as a currently NAEYC-Accredited program.

Responsibility: To retain a copy of all forms submitted to NAEYC and retain documentation verifying the date of all submissions. Postmark documentation is acceptable for submissions by mail and a copy of sent e-mail with date and time stamp information is acceptable for e-mail submissions.

Signature

☐ I have read and understand my program's rights and responsibilities.

☐ I verify that the information submitted in this form is accurate. If false or misleading information is ever provided to the NAEYC Academy, I understand that my program's pursuit of NAEYC Accreditation will cease and/or my program's current accreditation may be revoked.

☐ I verify that my program continues to meet all of the eligibility requirements for NAEYC Accreditation.

_____ _____
Signature Title

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Section 6: FEES FOR NAEYC ACCREDITATION

The School-Age Accreditation Visit fee is non-refundable.
This form will not be processed until NAEYC receives the applicable fee.

$1,500	School-Age Accreditation Visit

Late Fee

If the program submits the School-Age Accreditation Request Form up to one (1) calendar month past the submission deadline in which the program is applying for, a late fee of $125 must be included with the payment. Please note that this form will not be accepted unless NAEYC receives the applicable fee within one (1) calendar month past the submission deadline.

☐ I acknowledge that this form is being submitted up to one (1) calendar month past the School-Age Accreditation Form submission deadline and the $125 late fee is included with the payment.

Section 7: PAYMENT INFORMATION

Choose ONE method of payment and include applicable information below.

Check

Check Number:

Name on Checking Account:

Attach check to this form

If check is sent under separate cover, program ID number or other identifying information must be included on the check.

Purchase Order

Purchase Order Number:

Name on Purchase Order:

Attach purchase order to this form.

If purchase order is sent under separate cover, program ID number or other identifying information must be included on the purchase order.

Credit Card

☐ VISA ☐ MasterCard ☐ Amex

Credit Card Number:

Credit Card Expiration Date: Month: Year:

Name on card/checking account or purchase order holder:

Card billing address:

City:	State:	Zip:

Country:

☐ I authorize NAEYC to charge the above credit card at the amount of $

Signature:

Programs who do not wish to provide their credit card information at this time may pay by phone, 1-800-424-2460, option 3, option 1.

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Section 7: PAYMENT INFORMATION Continued

International ACH

International ACH Number:

Name on International ACH:

Signature:

NAEYC Information for Transfer:

Account Number: 2000013841458 Routing Number: 121000248 Swift Code: WFBIUS6S

International Wire Transfer

International Wire Transfer Number:

Name on International Wire Transfer:

☐ I acknowledge that a $20 fee is included with the payment for processing.

Signature:

NAEYC Information for Transfer:

Account Number: 2000013841458 Routing Number: 121000248 Swift Code: WFBIUS6S

Section 8: SUBMISSION INSTRUCTIONS

Mail completed form with payment to:

NAEYC Academy
P.O. Box 96036
Washington, DC 20090-6036

E-Mail completed form with payment to:

accreditation.information@naeyc.org

NAEYC accepts the postmark date or the e-mail sent date as the submission date. NAEYC recommends that programs obtain written confirmation of receipt of all forms sent to NAEYC P.O. Boxes. Please discuss tracking options with your local Post Office. NAEYC is not able to sign for materials that are delivered to a P.O. Box by an individual courier such as UPS or FedEx. Similarly, NAEYC recommends that programs save a copy of any automated e-mail replies as confirmation of receipt of all forms emailed to NAEYC.

Copy this form for your program's records before submission. NAEYC will not return this form to the program.

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