



3120 Eddy ST
Amarillo, Texas 79106
(806) 350-1722 Cynthia Hixon's direct line

Application for College Courses
SEMESTER ☐ Fall ☐ Spring ☐ Summer
Year 2025

Please Print and Use **Blue or Black Ink**

1. Name of Applicant: _____ AC Student ID #: _____
2. Address of Applicant: _____ City: _____ Zip: _____
3. Best Phone Number to Contact You between 8a-5p M-F: _____
4. E-mail address: _____
5. Child Care Facility Name: _____
6. Current age(s) you work with: ☐ infants/toddlers ☐ preschoolers ☐ school age ☐ family care – all ages
7. Child Care Phone No: _____ DFPS Provider License #: _____
8. Are you currently receiving academic support from another program or entity? ☐ Yes ☐ No
If, yes check what applies: ☐ WIOA ☐ FASFA ☐ other _____
9. Do you currently work in a contracted CCS childcare facility? ☐ Full- Time **(10 pts)** or ☐ Part-Time **(5 pts)**
10. Have you attended college before? ☐ No **(10 pts)** or ☐ Yes **(5 pts)**
*If yes, then how many total college credits have you completed in Early Childhood or related coursework?
Total Hours: ☐ 3- 9 hrs. **(5 pts)** ☐ 9-12 hrs. **(10pts)** ☐ more than 12 hrs. **(15pts)**
11. Is your major in Early Childhood or a related field? ☐ Yes **(15 pts)** or ☐ No **(0 pts)**
If no, list your major, be specific: _____
12. Did you attend Amarillo College during the last 12 months? ☐ Yes **(10 pts)** or ☐ No **(5 pts)**
13. Number of years you have been employed in the Early Childhood Profession: _____
(less than 2 yrs. = **5pts**) (2-4 yrs. = **10pts**) (5 yrs. + = **15pts**)
14. Is your facility participating in one of the following certification programs?
(if multiple, choose highest point category)
☐ Texas Rising Star Certification and/or Nationally Accredited (NAEYC, NAAC....) **(15 pts)**
☐ Texas School Ready Classroom and/or Working towards Texas Rising Star Certification **(10 pts)**
15. Please select ONE Early Childhood certificate/degree plan in which you are registered:
☐ Associates Degree **(20 pts)** ☐ Admin Certificate **(15 pts)** ☐ Provider Certificate **(10 pts)** ☐ CDA **(5 pts)**

16. Summarize your plan to complete your certificate/AAS degree and how these classes will directly impact your current and future career in child development. You may use a separate sheet of paper, if needed.

To continue the application process, proceed to meet with an AC advisor to register for your classes.

You will be required to submit a copy of your student statement which includes a list of classes and the tuition amount along with a copy of your unofficial Amarillo College transcript (if you are a returning Amarillo College student).

Failure to meet this requirement will result in denial of application

The approved scholarship includes tuition, books, and any additional fees associated with enrollment. **Voucher is based on the submitted schedule and once a voucher has been issued, the recipient may not change classes or use the voucher to purchase any other book/material that is not included in the voucher without express permission from Workforce Solutions Panhandle.**

The applicant's signature grants permission for WSP and Amarillo College to discuss and share any enrollment participation information.

Applicant's Signature: _____ Date: _____

Director/Owner Signature: _____ Date: _____

Upon approval, you may be asked to sign a voucher to ensure direct payment from Panhandle Regional Planning Commission be made to Amarillo College.

For Office Use Only: _____

Total Points: _____ out of 110 ☐ Approved by: _____ ☐ Denied – Reason for Denial _____