



## EARLY CHILDHOOD EDUCATION PROGRAM APPLICATION

### APPLICATION REQUIREMENTS

Complete all portions of this form and turn it into the ECE program coordinator: Kathleen Lloyd in the Lane Child and Family Center Office (Building 24, room 121). Or email to Kathleen Lloyd: [lloydk@lanecc.edu](mailto:lloydk@lanecc.edu) Please list your name as indicated in [myLane](#).

**L#:**

**FIRST NAME:**

**LAST/FAMILY NAME:**

**Birthdate:**

**Mailing Address:**

**LCC Email Address:**

**Phone/Cell:**

**Math placement** or class completed at highest level:

**Writing placement** or class completed at highest level:

*If you currently have any of the following information, please include it below:*

Oregon Registry Professional Development (ORO) UID #:

ORO Step Level:

Oregon Central Background Registry #:

**Confidentiality Agreement for Students Teaching in the LCFC Lab School (ECE 240):** My signature on this document represents my understanding and agreement regarding the need for complete confidentiality related to my presence and experiences student teaching in the Lane Child and Family Center (LCFC) Lab School (or in any other child care program). In the course of my training, I will be privy to confidential matters regarding children and families who participate in the program. This information is made available to me as a necessary component of my learning process. I understand and appreciate the need for access and by signing this document, accept my professional obligation regarding this matter. I understand that this obligation and oath of confidentiality applies to any and all time spent in the LCFC Lab School (or in any other child care program), the ECE 240 seminar, and all other college classes. I will value and protect the privacy and rights of others. Students must sign this in order to obtain a student teaching placement (ECE 240). Please sign (or type) your full name and include the date. This will count as your signature on this document.

**Signature:**

**Date:**