

**CDES 110 Early Childhood Curriculum and Practice I
Alternative Setting Approval Form**

Student Information

Student Name _____ Date _____

Is this your place of employment **YES NO**

Requested site information:

You will need to interview the director for most of this information and gain their signature approving their ability to place you in a classroom of 3-5 year olds for 5 hours per week.

Name of Center

Address

License # (or reason for exemption) _____

Hours of operation _____

Is the site NAEYC Accredited? **YES NO**

Ages served (whole center) _____

Number of children in classroom (the one you are requesting) _____

Director Name _____

Director's Education/Certification

Name of lead teacher in the classroom (the one you are requesting)

Lead teacher qualifications: (degrees, certifications, number of early childhood units)

Describe the environment (indoor and outdoor physical setting)

Describe the Curriculum: (is there a specific model used ie High Scope, or Creative Curriculum or if not how is curriculum planned)

What is the teacher's role in planning curriculum?

How is the progress of children documented?

What does the program believe are it's strengths? It's weaknesses?

I will be able to place _____ in a classroom that has 3-5 year olds for 5 hours per week.

Director Signature _____ **Date** _____

Director Phone Number: _____