

# NEBRASKA EARLY CHILDHOOD COACH APPLICATION

The following requirements must be met in order to be considered for a coaching contract with the Nebraska Department of Education (NDE) for Pyramid and/or Step up to Quality coaching, or Nebraska Children and Families Foundation (NCFF) for Rooted in Relationships Pyramid coaching:

**STEP 1:** Complete the Nebraska Early Childhood Coach Application and submit to NDE.

**STEP 2:** Complete the two-day Nebraska Early Childhood Coach Training.

**STEP 3:** Complete one or both of the following depending on your interests;

- One-day Pyramid coach training (for NDE and NCFF)
- One-day Step Up to Quality coach training

Completion of these training events does not guarantee a contract. Individuals who have completed coach trainings will be listed on a master coach registry and contacted when coaching opportunities become available across the state.

Direct all questions about the coach application and/or training process to:

**NCFF - Rooted in Relationships:**

Lynne Brehm, lbrehm@nebraskachildren.org

**NDE - Pyramid Model:**

Teresa Berube, teresa.berube@nebraska.gov

**Step Up to Quality:**

Lynne Cook, lynne.cook@nebraska.gov

# Nebraska Early Childhood Coach Application

## 1. General Information.

Name (Last, First, Middle Initial)			
Date of Birth (mm/dd/yyyy)			
Home Address		Home Email Address	
City	County	State	Zip Code
Home Phone ( )	Home Cell Phone ( )	Home Fax ( )	
Gender (Optional for data purposes only)  ___ Male ___ Female	Are you Hispanic, Latino or Spanish: (Optional for data purposes only)  ___ Yes ___ No	Race (Check all that apply. Optional for data purposes only) ___ White ___ American Indian/Alaska Native ___ Black or African American ___ Asian ___ Native Hawaiian/Other Pacific Islander	
Primary/Native Language		Secondary Language	
Are you certified in American Sign Language? ___ Yes ___ No			
Where do you prefer to be contacted? (Check <b>only one</b> in each column)	___ Home Phone ___ Home Cell ___ Work Phone ___ Work Cell	___ Home Email ___ Work Email	___ Home Address ___ Work Address

## 2. Employment

Current Employer/Organization		Title	Start Date
Work Address		Work Email Address	
City	County	State	Zip Code
Work Phone ( )	Work Cell ( )	Work Fax ( )	
Previous Employer Name/Address		Start date	End date      Position held
Previous Employer Name/Address		Start date	End date      Position held
Previous Employer Name/Address		Start date	End date      Position held
Do you currently work in an early childhood program? ___ Yes ___ No		Total number of years you have worked in early childhood care and education _____.	

### 3. Early Childhood Coach Training and Experience

I have completed Nebraska Early Childhood 2-day Coach Training Date \_\_\_\_\_

I have completed Pyramid Training Date \_\_\_\_\_

I have completed TPOT Training Date \_\_\_\_\_

I have completed TPITOS Training Date \_\_\_\_\_

I have completed Environment Rating Scale (ERS) Training Dates of completion: Intro \_\_\_\_\_  
Practice \_\_\_\_\_ Closer Look \_\_\_\_\_

I have completed CLASS Training Date/Scales \_\_\_\_\_

I have completed other relevant training Please specify \_\_\_\_\_ Date \_\_\_\_\_

I have Pyramid Coaching experience in a school setting (preschool ages 3-5) District Name/Location \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ I received reflective supervision in this role.  Yes  No

I have Pyramid Coaching experience in a child care setting Child Care Name/Location \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ I received reflective supervision in this role.  Yes  No

I have early childhood coaching experience in another capacity/using another coaching model  
Specify coaching model/agency/location \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ I received reflective supervision in this role.  Yes  No

### 4. Education, Credentials and Training

Please indicate all educational levels you have completed.

High School Diploma/GED  Bachelor's Degree in Related Field

One Year Certificate in Early Childhood Education  Master's Degree in Early Childhood Education

Associate's Degree in Early Childhood Education  Master's Degree in Related Field

Associate's Degree in Related Field  PhD/EdD

Bachelor's Degree in Early Childhood Education  Specify related degree \_\_\_\_\_ Year Earned \_\_\_\_\_

Do you have a current Nebraska teaching certificate?  Yes  No

If yes, please specify endorsement(s) \_\_\_\_\_

Other professional licenses/certifications Please specify \_\_\_\_\_

**5. Coaching Initiative and Time and Travel Availability (please mark all that apply)**

- I am interested in coaching for Step Up to Quality
- I am interested in Pyramid coaching in the school setting (ages 3-5)
- I am interested in Pyramid coaching in the child care setting.

Program type (rank in order of preference):  
 Family Child Care  Centers  Schools

Please indicate how many hours you would be available to coach each month.

- 2-10 hours per month
- 10-20 hours per month
- 20-40 hours per month
- 40-80 hours per month
- 80-110 hours per month
- 110-160 hours per month

How far are you willing to travel from your home?

- Within 0-50 miles
- Within a 50-100 miles
- Within 100-150 miles
- Within 200 miles
- Anywhere in the State of Nebraska

Are you willing to provide training/coaching that might require an overnight stay?  Yes  No

**6. References**

Please list three Professional References who know your work as a trainer, consultant coach or mentor.

1.	Name: _____	Title: _____	Organization: _____
	Address: _____	Phone: _____	Email Address: _____
2.	Name: _____	Title: _____	Organization: _____
	Address: _____	Phone: _____	Email Address: _____
3.	Name: _____	Title: _____	Organization: _____
	Address: _____	Phone: _____	Email Address: _____

By signing and submitting this application, I affirm that the information listed is true and complete and I agree to have my information shared with the Nebraska Early Childhood Coach partners listed below.

Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit completed application to Morgan Krull [morgan.krull@nebraska.gov](mailto:morgan.krull@nebraska.gov).**

