



**PAUL V. SHERLOCK
CENTER ON DISABILITIES**
Promoting Membership in School, Work and Community
FEINSTEIN SCHOOL OF EDUCATION AND HUMAN DEVELOPMENT

**Rhode Island Early Intervention
Certificate Option Application**

Congratulations on your decision to pursue the Rhode Island Early Intervention Certificate Option! Please complete this application in its entirety. Incomplete applications will not be considered and will be returned to the applicant. You will receive a determination via email no later than 30 days from receipt of your complete application.

Completed applications should be mailed to or hand delivered to:

Leslie Bobrowski
Paul V. Sherlock Center on Disabilities
Rhode Island College
600 Mount Pleasant Avenue
Providence, RI 02908

All questions regarding this application should be directed to Leslie Bobrowski via email: lbobrowski@ric.edu.

Section 1: Applicant Information

Name: _____

Address: _____

Phone: _____

Email: _____

Date of Application: ____ / ____ / ____



Section 2: Applicant Education

(Please attach relevant documentation)

Degree(s)/School/Year: _____

Additional Course work (school/year): _____

Relevant Certificates and Continuing Education: _____

Section 3: Early Intervention Information

Current Rhode Island EI Program:

Supervisor/Phone/email:

Director/Phone/email:



Section 4: Application Essay

Please provide a type-written summary as to why you want to apply for acceptance into the Rhode Island Early Intervention Certificate Option Program. As you gather your thoughts, you may want to consider and write about the following:

What do you find most rewarding about working in Early Intervention? What makes you passionate about this work? What excites you about coming to work each day?

Discuss any special projects or innovative program that you feel you have made a significant contribution. What was your role? What were the outcomes?

Discuss a specific family that you worked with in which you feel you made a difference? What about the situation are you most proud of? What would you change?



Section 5: Provider Letter of Commitment

Our Program, _____ is committed to the Early Intervention Certificate process.

We are recommending _____ for this option for the following reasons:

The candidate and I understand the requirements for the EI Certificate Portfolio and upon successful completion within an agreed upon timeline, will grant her/him EI Level 2 provider status.

Please check to indicate that the candidate and program representative have discussed any impact on salary as a result of the completion of the EI Certificate Program and attainment of EI Level 2 provider status.

Director Signature _____ Date ___/___/___

Supervisor Signature _____ Date ___/___/___

Staff Signature _____ Date ___/___/___

Staff Date of Hire ___/___/___

Anticipated Certificate Completion Date ___/___/___



Section Six: Application Checklist

- Have you completed every section of the application in its entirety?
- Did you attach your most current and updated resume?
- Did your EI program director complete the commitment letter supporting your application?
- Did you include an official copy of your college transcripts?
- Did you attach proof of attendance for relevant workshops and conferences?
- Did you complete the application Essay?

I have completed the Rhode Island Early Intervention Certificate Option Application in its entirety. I have attached all required documentation and attest that it is true and valid to the best of my knowledge. I understand that I will notification via email no later than 30 days of the receipt of this application.

Applicant's Signature

Date



600 Mt. Pleasant Avenue · Providence, RI 02908-1991
Phone: (401) 456-8072 · TDD: (401) 456-8773 · Fax: (401) 456-8150 · www.sherlockcenter.org
A University Center for Excellence in Developmental Disabilities