## **Instructions**

This form is to be used to determine the number of ECE credits or education, (excluding secondary education) in an individual's transcript(s) and Career Lattice Level placement. The completed form will serve a record Career Lattice placement for the individual. Follow the guidance below when completing the form.

- 1. Contact Information: Complete name, current email and employer information.
- 2. **Institution of Higher Education (IHE)**: List all colleges/universities attended. Check if the IHE is an accredited institution.
- 3. **Degrees, Credentials, Certificates:** List all degrees, credentials, certificates awarded. Include the major course of study if applicable.
- 4. **ECE/Education Credits:** List total credits if in an ECE/mixed age setting (including special circumstance/other at bottom of chart) AND determine the total credits if in a SACC only program. Please refer to *Teacher Quality* guidance to determine when credits in a degree need to be counted.
- Career Lattice Level: Determine the PA Early Learning Keys to Quality Career Lattice Level for ECE, SACC Only, and Exception/Other (if applicable). At a minimum, ECE and SACC must be calculated.
  - Document justification for "Exception" category. List ONLY the number of credits that were calculated for this special circumstance. These credits may not "count" if the practitioner leaves that program setting, and would therefore be subtracted from the totals in #4 above. For example, Nursing credits may receive full credit if a practitioner was employed in a respite care setting, however not all of the credits may count in a non-respite care setting.
- 6. **Alternative Pathways:** If an alternative pathway was used to determine Career Lattice level or Director Qualifications, complete these fields.
- 7. **Signatures/Date:** The form on the following page must include the reviewer's signature including organization/agency and date. Copies of the transcript(s) used to make the determination and the Listing of Courses and Credits counted should be attached.
- 8. **Distribution:** A copy of the original signed document should be placed in the employee's personnel file. A copy should be placed in the facility file at the Regional Key. The original copy is the property of the employee for their professional development record.
- 9. **Reviewer Notes/Justification of Decision**: In this field the reviewer should write any notes supporting the Career Lattice placement. This field should always be completed when the Career Lattice Level for an "exception" is determined.
- 10. **Ethical Considerations for Review:** To avoid a potential conflict of interest, transcripts are not to be reviewed by anyone with whom the candidate has or has had a prior professional or personal relationship. If there is no appropriate person within an agency to review the documentation, it should be sent up to the next review level.

## ECE College Credit Calculation Tool - Form

Contact Information					
Practitioner Name:	_ Contact Email:				
Current Employer:	_MPI #:				
Address:	_Phone:				
Degrees/Credentials					
College/University Name:	Accredited Institution:				
Degree: Major:					
Degree: Major:					
College/University Name:	Accredited Institution:				
Degree: Major:					
Degree: Major:					
Certificates/Credentials:					
Certificates/Credentials:					
Career Lattice Level ECE: SACC: Exception:					
Alternative Pathways					
Career Lattice Level met via Alternative Pathway:	☐ Yes ☐ No				
Director Qualifications met through Alternative Pathwo	ay: 🗆 Yes 🗆 No				
Waiver and Action Plan in Place:	☐ Yes ☐ No				
Reviewer Notes/Justification of Decision					
Reviewer's Name:	Title:				
Agency:					
Reviewer's Signature:	Date:				

## ECE College Credit Calculation Tool – Listing of Courses and Credits

## **Instructions**

**Credits and Course** 

The following table should be used when calculating the number of credits in an individual's transcript. This form does not need to be completed if the degree is clearly in ECE. If completed, this form should be included with documentation along with the completed ECE College Credit Calculation Tool. *Make additional copies of this form as needed.* 

Practitioner Name:	er Name:Contact Email:				
Current Employer:	MPI #:Phone:				
Review Date:					
Course Number and/or Name		# of ECE credits	# of SACC Credits	# of Other Credits	
	Total Credits				