Organizational PQAS Application for Higher Education

The Office of Child Development and Early Learning (OCDEL), in working to establish collaborations across the varied systems that provide professional development to early childhood and school-age professionals in Pennsylvania, approves organizations where the organization offers a professional development approval and oversight system for instructors that is comparable to PQAS.

The **Pennsylvania Quality Assurance System (PQAS)** certifies instructors and organizations which provide professional development to early childhood and school-age professionals in Pennsylvania. The PQAS maintains a registry of approved instructors to help ensure that professional development activities meet quality standards.

Staff who are approved, can only provide professional development under the auspices of the approved organization for events that are available to the early childhood education community.

Application Process

- The review process for a completed application with all required documentation can take up to 90 days once received.
- If additional items are needed, the contact person listed in the application will be notified via email.
- Once successfully reviewed, the contact person will be notified of status via email.
- Approval is valid for three years.
- When approval expires, an updated application must be submitted for reapproval.

Submit Application

Subject Line: Organizational PQAS Application

1. Organization Information
2. Representative Agreement
3. Professional Standard Area(s) Form
   Must be filled out by all staff members seeking approval.
4. Staff Spreadsheet

Email completed application and all documents to PQAS@pakeys.org.

The Organization & Instructor Requirements below must be completed prior to applying.

Organization Requirements

Organization must have a current Organization Profile with the PD Registry.

Create an Organization Profile*

1. Log into www.papdregistry.org
2. Click on **Add Organization Profile** box within the main page of your profile.
3. Click **Create Profile**
4. Complete the Contact Information section
5. Answer **NO** for 'Does this organization provide care and/or education to children?'
6. Organization Type: Complete this section as I did in the below screenshot.
7. Organization Address: Complete this section.
8. Click **Submit**.

*NOTE: Unsure if your organization already has an Organization Profile? Email **pqas@pakeys.org** BEFORE creating a new profile.

Instructor Requirements

Instructors must
- be a current employee of the organization;
- have a current profile in the PD Registry;
- attach an up-to-date Pediatric First Aid/CPR Instructor Card within your Education Tab - CPR, First Aid, Fire Safety Requirements section on your PD Registry profile (*if requesting Pediatric First Aid/CPR*);
- complete the Professional Standard Area form within the application; and
- attach the Organization to the employment tab on their profile.

Engaging Adult Learners*
*NOTE: This is a suggested course for all applicants. It is highly encouraged but not mandatory.

Engaging Adult Learners is a three-hour online course **in the PD Registry**. To locate and register:

1. Go to **Search Training Events** in the left-hand menu
2. Scroll down and select **Training Type**.
3. Select **Online Self-Paced** and E Learning
4. Click **Search**
5. Scroll through the events until you find the online course you are looking for
6. Click **Register** and follow payment steps. (Cost: $7.00)
7. Once you have registered, you may click on your **MY PD tab** to get to the course
8. If a blue box appears to the right of the course title, click on it to begin the course. If one does not appear click the course title to be taken to the course details where a link to the course will be provided.

Organization Information

This application is to be completed by the person responsible for providing oversight to professional development programs within an Organization, Corporation, Association, or Agency.

Organization Name: **Org ID#:**

Address:

City: **State:**   **Zip:**

Contact Person: **Title:**

Email: **Phone:**

Type of Organization/Association:

Head Start Organization: **STAR 3:**   **STAR 4:**

AEYC or Child Care Association Employees:

Intermediate Unit:

Early Intervention Technical Assistance:

Government Bureau:

School District:

Specialty Discipline (specific competency group):
(Organizations that do not offer professional development that is specific to early childhood or school-age educational practice.)

Emphasis Area:

Professional development provided by the applicant targets the following groups (select all that apply):

Infant/Toddler   **Preschool**   **School-Age**   **Adults**

Representative Agreement

Check all and provide digital signature at the bottom of the page.

The Organization Representative* agrees to:

Provide oversight to Instructors in the development, implementation, and evaluation of professional development experiences to ensure high quality services to Pennsylvania early childhood and school-age practitioners.

Code events using **Pennsylvania Professional Standards and Competencies for Early Childhood Educators** as applicable.

Post courses that are open to early childhood education and school-age professionals on **the Pennsylvania Key's PD Registry**.

Follow recognized early childhood code of ethics, including delivering professional development in a culturally and individually sensitive manner using adult learning principles and current, developmentally appropriate best practices in the early childhood education and school-age fields.

Maintain records of each staff that documents each person's eligibility, including:

Résumé indicating at least a bachelor's degree or certification in a specialty discipline in a field related to the professional development event topic

Verifies instructors are current employees of the organization.

Verifies that outside contracted instructors, must have their Individual PQAS approval prior to event.

Failure to follow the expectations will result in termination of the Organizational PQAS.

I have read the above requirements and agree to comply with them.

_____ _____
Signature of Person Responsible for Program   Date

_____
Title

Professional Standard Area Form*

*NOTE: This form must be completed by all staff members seeking approval.

Please identify your ability to instruct in the specific Professional Standard Area(s) listed below, which are drawn from the Pennsylvania Professional Standards and Competencies for Early Childhood Educators. Select only those areas that are appropriate for your experience and educational background.

Name: **Registry ID#:**   **Date:**

Professional Standard Area	Justification
PSA 1: Child Development and Learning in Context	
PSA 2: Family-Teacher Partnerships and Community Connections	
PSA 3: Child Observation, Documentation, and Assessment	
PSA 4: Developmentally, Culturally, and Linguistically Appropriate Teaching Practices	
PSA 5: Knowledge, Application, and Integration of Academic Content in the Early Childhood Curriculum	
PSA 6: Professionalism as an Early Childhood Educator	
PSA 7: Health and Safety	
K8: Program Organization and Administration	
*Pediatric First Aid/Pediatric CPR	

*NOTE: If requesting Pediatric First Aid/CPR, please attach an up-to-date Pediatric First Aid/CPR Instructor Card within your Education Tab- CPR, First Aid, Fire Safety Requirements section on your PD Registry profile.

Staff Spreadsheet

Staff First Name Last Name	Registry ID #	Currently PQAS Approved (Yes or No)	Professional Standard Area(s) Requested
Ex: Jane Doe	5689452	No	PSA 1, PSA 2, etc.