

Gateways Credential

Work & Practical Experience—Verification Form Family Child Care Providers

Family Child Care Providers (FCCP) must complete this form to verify experience for the Gateways to Opportunity credentials. Please follow the steps below:

Step 1: Include copies of your Illinois Department of Children and Family Services (IDCFS) license for the years of experience to be counted toward a credential.

Step 2: Please have two families with children in your program complete pages 3 and 4. Those applying for the Infant Toddler Credential must have verification of direct infant toddler teaching experience in addition to direct ECE experience.

Personal Information

Participant Name: _____

Name on License: _____

Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Ages of Children Served: _____

Total Hours in Business: _____

(Hours Per Week x By Weeks Per Year x By Number Of Years)

Participant Signature: _____ Date: _____

By signing the above, I verify that the information provided herein is accurate and correct to the best of my knowledge. I understand false or misleading statements or subsequent documentation may constitute grounds for denial of a Gateways to Opportunity credential.