



February 14, 2012

Dear Colleague:

The EARLY LEARNING COALITION OF ORANGE COUNTY is pleased to announce it is currently accepting nominations for individuals interested in serving on the Coalition Board of Directors as the private child care provider representative as mandated by Florida Statute 411.01.

To be eligible for nomination, the individual must own or be employed by a licensed private childcare program, which is either center or home based. The program, however, cannot be classified in CCR&R as faith-based.

Additionally, the individual must be willing and able to give of the time required for Coalition board and committee meetings. Nominees should assume a commitment of at least 3 to 4 hours per month in meeting and meeting preparation time.

The term of office will be from election and ratification by the Coalition to October 2014.

A nomination form is attached to this letter. Please note that all **completed nomination forms must be received by the Coalition office no later than March 15, 2012.** As indicated, the form may be faxed to 407-749-0282 or sent by USPS to:

EARLY LEARNING COALITION OF ORANGE COUNTY
Attn: Private Provider Representative Nomination
PO Box 540387
Orlando, FL 32854

Questions regarding this opportunity may be address to me at 407-841-6607 extension 106 or via email to Karen@elcoc.org.

Thank you for all you do for Orange County children.

Sincerely,

Karen Willis, CWDP
Chief Executive Officer

Attachment

Early Learning Coalition of Orange County

Board Membership Application		
Personal Information		
Last Name:	First Name:	Middle Name:
Home Address:		
Home Phone:	Home Fax:	Home Email:
Employer Name:		Job Title:
Employer Address:		
Business Phone:	Business Fax:	Business Email:
My employer is (check one); <input type="checkbox"/> a private for-profit enterprise <input type="checkbox"/> a private non-profit enterprise <input type="checkbox"/> a public entity		
My employer operates in (list all applicable counties/states):		
My employer is a member of (list all applicable Chamber of Commerce or Economic Development Corporation):		
Please direct Coalition business information to (check one): <input type="checkbox"/> my home contact information <input type="checkbox"/> my employer contact information		
Community Involvement		
Please list up to five community, civic, professional, business and other organizations of which you are or have been a member. Please list your current affiliation(s) first:		
Organization	Date of Membership	Position Held
Member Classification		
Seats on the Coalition are established by state statute. Please indicate the classification for which you are applying.		
<input type="checkbox"/> Private Sector. Please indicate whether: You currently have or, if retired, have had policy making or hiring authority in the for-profit company noted as my employer. Yes No You or your family members derive income from early education and care programs. Yes No	<input type="checkbox"/> Child Care Provider Representative (see nomination provision below) Please indicate which type of program you currently work in: <input type="checkbox"/> Faith-based program (Center) <input type="checkbox"/> Private program (Center or Home)	
<input type="checkbox"/> Children with Disabilities Representative	<input type="checkbox"/> Community At Large Representative	

Statement of Interest

Please indicate your reasons for applying and the qualifications you bring that will enhance the work of the Coalition (attach additional pages as necessary):

Nominee Characteristics

The Coalition strives to reflect the makeup of our community. To assist us in that effort, please respond to the questions below:

Race (check one): <input type="checkbox"/> White, non-Hispanic <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Other	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Age: <input type="checkbox"/> under 18 years of age <input type="checkbox"/> 19-25 <input type="checkbox"/> 26-55 <input type="checkbox"/> over 55 years of age
Are you a Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a parent: <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you require any special accommodation in order to participate fully in Coalition business meetings: <input type="checkbox"/> Yes (specify) <input type="checkbox"/> No

Commitment and Operational Statements

Time Commitment: Serving on the Early Learning Coalition of Orange County will require a commitment of time, including regular Coalition meetings, committee involvement, reading and becoming educated about many aspects of early childhood development, workforce development, welfare reform, and education. The Coalition sets its meeting schedule at the annual meeting in October of each year.

Conflict of Interest: Conflict of interest may occur when an item is presented for a vote that will directly affect you, your employer, or another organization with which you are involved. Conflict of interest rules generally require you to disclose the conflict, and abstain for discussion and/or voting on the matter. Selected members are prohibited from voting during Coalition meetings at any time.

Government in the Sunshine: The Early Learning Coalition of Orange County is a legislatively mandated group subject to the guidelines of Florida Statutes 286.011. As such, all meetings where two or more Board members are present and Coalition business is discussed must be publicly noticed in advance of the meeting.

Financial Disclosure: All Board members may be required, when directed by Corporate legal counsel, to file the short form financial disclosure annually with their Supervisor of Elections. Failure to do so has significant financial penalties.

I have read and understand the above statements and agree to abide by these. I also attest to the accuracy of all remaining information included above.

Nominee Signature

Date

Nominating Individual or Organization

(To be completed only for individuals seeking nomination as a childcare provider representative)

The Childcare Representative seats are subject to election. As such, to be placed on the ballot candidates must be nominated. Individuals may nominate themselves.

This nomination is for the Coalition Board seat reserved for (check one) _____ a private childcare provider _____ a faith-based childcare provider, and is submitted on behalf of the nominee referenced above.

Nominating Individual Name and Title

Date

Organization

For additional information or to submit a completed Form contact:

EARLY LEARNING COALITION OF ORANGE COUNTY

PO Box 540387

Orlando, FL 32854

407-841-6607 (voice)

407-749-0282 (fax)