

July 24, 2018

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 1002.83.

To be eligible for nomination, the individual must own or be employed by a licensed, private for-profit childcare program, which is either center or home based, and cannot have any Class 1 violations within the last two (2) years and cannot have a history of Class 2 and/or Class 3 violations. The program also 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 2022.

A Board Membership Application and a Board Participation agreement are attached. Please note that <u>all completed forms must be received by the Coalition office no later than August 15, 2018</u>. As indicated, the forms must be faxed to 407-749-0282 or sent by U.S. mail to:

EARLY LEARNING COALITION OF ORANGE COUNTY ATTN: Private Provider Representative Nomination 7700 Southland Blvd., Ste. 100 Orlando, FL 32809

Questions regarding this opportunity may be addressed 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

Early Learning Coalition of Orange County

| Board Membership Application | | | | | | |
|--|---------------------------|---|--|--|--|--|
| Personal Information | | | | | | |
| Last Name: | First Name: | 1 | Middle Name: | | | |
| Home Address: | | | | | | |
| Home Phone: | Mobile Phone: | ŀ | Home Email: | | | |
| Employer Name: | ver Name: | | lob Title: | | | |
| Employer Address: | | | | | | |
| Business Phone: | Business Fax: | E | Business Email: | | | |
| My employer is (check one); a private for-profit enterprise a private non-profit enterprise a public entity | | | | | | |
| My employer operates in (list al | applicable counties/st | ates): | | | | |
| My employer is a member of (list all applicable Chamber of Commerce or Economic Development Corporation): | | | | | | |
| Please direct Coalition business my home contact informations. | ` | • | mation | | | |
| | Community | Involvement | | | | |
| Please list up to five community or have been a member. Pleas | , civic, professional, bu | ısiness and an | y other organizations of which you are | | | |
| Organization | Date of Mei | | Position Held | | | |
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| | | assification | | | | |
| you are applying. | olished by state statute | . Please indica | ate below the classification for which | | | |
| Private Sector | | Child Care Provider Representative (see nomination provision below) | | | | |
| 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: YesNo | | Please indicate which type of program you currently work in: Faith-based program (Center) | | | | |
| You or your family members derive income from early education and care programs:YesNo | | Private program (Center or Home) | | | | |
| Children with Disabilities Representative | | Community At Large Representative | | | | |

| | Statement of Interes | t |
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| | nittee interests/expertise | ou bring that will enhance the work of the [Finance/HR/Governance/Quality/Foodessary): |
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| | lominee Characteristi | |
| The Coalition strives to reflect the makeu the questions below: | p of our community. To a | ssist us in that effort, please respond to |
| Race (check one):African-AmericanAmerican Indian or Alaskan NativeHispanicWhite, non-HispanicOther | Gender:MaleFemale | Age:under 1819-2425-4041-5051 or older |
| Are you a Veteran:YesNo | Are you a parent:YesNo Children's Ages | Do you require any special accommodation in order to participate fully in Coalition business meetings: Yes (specify) |
| | Officients Ages | No |

Commitment and Operational Statements

<u>Member Commitment:</u> Serving on the Early Learning Coalition of Orange County will require a commitment of time, including regular Coalition meetings, involvement in at least one (1) committee, 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. In addition, members:

- Serve a term of four-years (may reapply for an additional four-year term not to exceed a maximum of two consecutive four-year terms)
- Make an In-kind or financial contribution toward the well-being of the organization
- Attend signature events

<u>Conflict of Interest:</u> 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.

<u>Government in the Sunshine:</u> 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.

<u>Financial Disclosure:</u> 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 state of all remaining information included above. | ements and agree to abide by these. I also attest to the accuracy |
|---|---|
| Nominee Signature | Date |
| | g Individual or Organization seeking nomination as a childcare provider representative.) |
| The Childcare Representative seats are submust be nominated. Individuals may nominated. | oject to election. As such, to be placed on the ballot candidates ate themselves. |
| | eat reserved for (check one) a private childcare provider d is submitted on behalf of the nominee referenced above. |
| Nominating Individual Name and Title | Date |
| Organization | |

For additional information or to submit a completed Application contact:

EARLY LEARNING COALITION OF ORANGE COUNTY 7700 Southland Boulevard, Suite 100 Orlando, FL 32809 Phone: 407-841-6607

Fax: 407-749-0282



AGREEMENT OF MEMBER OF BOARD OF DIRECTORS FOR ANNUAL PARTICIPATION EXPECTATIONS

October 2018 to October 2019

<u>MISSION STATEMENT</u> - The Mission of the Early Learning Coalition of Orange County is to provide unified leadership, support and guidance to ensure that the children of our community to reap the benefits of developmentally appropriate, research-based school readiness and VPK programs, respecting the role of the parent as their child's first teacher.

BOARD OF DIRECTORS GENERAL RESPONSIBILITIES

- 1. Governance (Oversee/Evaluate, Review/Monitor)
- 2. Leadership (In partnership with CEO and management, guide the mission and direction)
- 3. Stewardship (Ensure dedication to and use of assets for benefit of public)

1. GOVERNANCE

- a. Ensure the integrity of the Coalition by declaring and refraining from voting on any issue where you may have an actual or perceived conflict of interest.
- b. Strive to attend 100% of the scheduled Board of Directors meetings.
- c. Chair and/or serve on a standing committee, special project committee or task force.

2. LEADERSHIP

- a. Advocacy
 - Serve as an advocate for the Early Learning Coalition of Orange County (ELCOC or the Coalition).
 - Articulate your passion, expertise and insight on early learning to others.
 - Use your influence and connections on behalf of the ELCOC. Share contacts and ideas that benefit specific programs, special events and initiatives.
- b. Identify and help secure other resources to support and expand the work of the ELCOC
- c. Invite and accompany at least two individuals to attend an ELCOC event and participate in an ELCOC volunteer program

3. STEWARDSHIP

- a. Make a corporate and/or personal, financial contribution to the Coalition.
 - Monetarily support fundraising activities to achieve a meaningful personal giving goal annually.
 - Utilize personal contacts to secure contributions from friends, individuals, businesses, civic clubs, associations and foundations.
 - Monetarily support and attend Coalition events and fundraising efforts such as: "Destination Kindergarten: A 2,000 Day Journey", "Volunteer Breakfast", "Provider Appreciation Ceremony" and "The First Five Years Gala".
- b. In-kind contributions are welcomed if they provide a cost savings and /or have the potential for raising significant revenue.

| I acknowledge and concur with the terms of this agreement | | |
|---|------|--|
| Print Name | Date | |
| Signature | | |