**IAL**

**INITIAL: LEVEL 1 – Applicant’s Checklist Cover Sheet**

**Learning Center Leadership Certification**

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| --- | --- | --- | --- |
| **Name** |  | **Title** |  |
| **Institution** |  |
| **A****ddress** |  |
| **City** |  | **State** |  | **Zip** |  |
| **Phone** |  | **Fax** |  | **E-mail** |  |
| Please provide contact information for other individual(s) who should receive notification upon awarding of certification.If there are more than two, please provide information on an additional sheet.  |
| **Name** |  | **Title** |  |
| **E-mail** |  |
| **Name** |  | **Title** |  |
| **E-mail** |  |

**This is the cover sheet checklist to complete for your application for LEVEL 1 Learning Center Leadership Certification. Please provide a brief description of the information you are including to support the criteria listed below. Use the Appendix labels listed below as you assemble your application packet to provide reviewers with quick reference to your supporting documentation.**

|  |  |  |
| --- | --- | --- |
| **Level 1 Base Criteria (you must meet all of these)** | **Description of** **Supporting Documentation** | **Appendix** |
| **Completion of a Bachelor’s Degree supported by transcripts.** * Official transcripts are required (photocopies acceptable).
* Grade reports are unacceptable.
 |  | **A** |
| **Work Experience:** 1-3 years’ work experience in post-secondary (higher) education learning assistance. Please refer to the application instructions to see if you qualify.Documentation must be: * 2 letters of recommendation, or
* 2 separate performance appraisals, or
* One letter and one performance appraisal.
* Letters and appraisals must include sufficient documentation to prove total years of experience.
* **Letters must be signed and on letterhead (**photocopies accepted).
 |  | **B** |
| **Development of a personalized learning assistance position statement.** Criteria for position statement:* 500 words, double-spaced
* Address your beliefs about learning assistance at your institution and/or the field at large.
* Cite any research you discuss.
 |  | **C** |
| **Development of a professional development plan.** Professional development plan criteria:* 500 words, double-spaced
* Address what you want to accomplish in the learning assistance field and your plan for accomplishing your goals.
* Avenues for professional development:
	+ Your institution, your region/state, the Web, NCLCA, other professional organizations and/or the field at large.
 |  | **D** |
| **Copy of current resume/curriculum vitae** |  | **E** |
| **Level One Choice Criteria (choose one of these)** | *Pick 1 of the 2 options below.**Place N/A if not applicable for the area not evaluated* |
| **Attendance at an applicable regional or national learning assistance in-person or virtual conference/institute.** Items to include:* Registration receipt
* Website link or copy of program cover page including title, date, and location of conference
* Listing of the presentations attended – you may want to copy the program and highlight the sessions you attended
 |  | **E** |
| **Coursework in student development, learning assistance, developmental education, curriculum design, etc. Coursework can include:*** Tutor/peer training at the undergraduate level
* At least one course in student development, learning assistance, developmental education, curriculum design, etc.
	+ Documented by academic transcript **OR** letter from instructor/department/ online service if audited/non-credit course.
 |  | **F** |
| **Any Additional Comments by Applicant:** |

Please respond to the following questions:

1. I am a current NCLCA member in good standing \_\_ Yes \_\_ No
2. The invoice # is \_\_\_\_ and was paid via \_\_\_ Check, \_\_\_ PayPal, \_\_\_ Online Store.
3. For informational purposes, I authorize NCLCA to publish (in electronic and print formats) my name, level of certification, and other pertinent data related to NCLCA certification.

Signature Date

Revised 2/18/2021 by J. Haley