



# Volunteer Application for Scholarships for 2023 Conference Registrations "Enhancing Our Minds...In 2023"

June 21-25, 2023

Sheraton Sand Key Resort, 1160 Gulf Boulevard, Clearwater Beach, FL 33767

Approved applicants applying for a scholarship will be required to volunteer 3 hours.



### Volunteer Qualifications/Requirements:

1. Be a current **provider member of FFCCHA** (keep valid thru June 30,2023) operating as a **FL registered or licensed provider** ---Or be a current **Co-provider member of FFCCHA** (keep valid thru June 30, 2023)
2. Complete and submit this scholarship form along with the **\$35.00 fee--NO Refunds**. Returned checks assessed a \$47 fee.
3. **Attend a volunteer orientation before going to conference:** check only one  
 \_\_\_ **TBA** (English and Spanish orientations) at the spring Full Board meeting in person, **select your own volunteer times – only at this on-site meeting – check for on-site or virtual details**  
 \_\_\_ **May TBA** (both in English) at 7:00 PM via **ZOOM/phone conference call** (call details emailed to you in May)  
 \_\_\_ **May TBA in Spanish only** at 7:00 PM via **ZOOM/phone conference call** (call details emailed to you in May)
4. **Attend** the entire conference day(s) that you applied for. Turn in a **completed conference evaluation**.
5. **Wear** an Orange Apron (supplied by FFCCHA) over your attire when serving your 3 volunteer hours. (no tank tops or short shorts)
6. **Sign-in** at conference and **fulfill your 3-hour volunteer duties as assigned**, return hostess paper, **and sign-out**.

Payment options: online credit card payment, check or money order payable to FFCCHA

Mail to: FFCCHA Volunteers, Karan Hiester 1859 Mango Tree Dr., Edgewater, FL 32141

**Deadline: April 30, 2023** Qualifying applications will be dated as received and **selected on a first come, first serve basis** until all scholarships have been awarded. All providers will be notified when received as to their acceptance status. **All applications received by the deadline** will be entered in a drawing for a prize.

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Select the Type of Registration you are applying for:

- Full conference (Thur pm-Fri-Sat-Sun am)  Friday conference (8am-5pm only)  
 Sat conference (8am-5pm only)  Sat-Sun am conference

### Print Clearly:

Name: \_\_\_\_\_ Primary Language: \_\_\_\_\_ Secondary Language: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Local Chapter: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name of FCC Home \_\_\_\_\_ Is this your first conference? \_\_\_\_\_

Check all that apply:  Registered  Licensed  Large Licensed  VPK  NAFCC Accredited  NAFCC Observer  CDA  EHS (Early Head Start)  Director Credential  College Degree, Type \_\_\_\_\_

### Please rate your first 1<sup>st</sup> and 2<sup>nd</sup> preferences in volunteering (however, no guarantees)

\_\_\_ English workshop hostess \_\_\_ Fundraising Table worker \_\_\_ Set-up Thur 2-5p \_\_\_ Provider Celebration Sat 7-10pm  
\_\_\_ Spanish workshop hostess \_\_\_ Registration Table worker \_\_\_ Clean-up Sat 5pm \_\_\_ other \_\_\_\_\_

You must write 30 words or less on how receiving a scholarship to this conference will benefit your child care.

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### PLEASE READ THE FOLLOWING STATEMENT ---- SIGN AND DATE!

I, the undersigned, do hereby state: check one below:

- \* I am a current Florida family childcare **member** of FFCCHA, Inc. \_\_\_ **registered** \_\_\_ **licensed** \_\_\_ **co-provider**
- \* I understand that **if I do not attend** the full conference or **fulfill** my three hours as a volunteer, my scholarship will be voided, and **I will be responsible for the full cost of my registration**.
- \* All of the above information is correct.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

If you need an accommodation because of a disability in order to participate in the child care training process: contact, Tammy Tener, Executive Director at least two weeks prior to the first training date at 407-234-3473 between 8:00 am and 6:00 pm. Calls can be received Monday - Friday.

**Questions? Contact Karan Hiester** at (386) 689-3046 or via e-mail: conference@familychildcare.org  
**Conference scholarships go quickly. So, don't be left out! Send completed form today!**

Office use only: Cash/Ck# \_\_\_\_\_ Received date: \_\_\_\_\_ Receipt# \_\_\_\_\_ Verified membership/expiration date: \_\_\_\_\_