

Northern Lights Verification Cover Sheet

Submit a completed copy of this form and any documents you wish to enter into your Bright Futures Information System (BFIS) Quality and Credential Account. We cannot accept documents without this form.

I understand that Northern Lights will only enter verifiable, authentic information into my BFIS Quality and Credential Account. If I work at a regulated child care program, my employer has access to view my professional development, education, and credentials, including any scanned transcripts in my BFIS Quality and Credential Account.

SIGNATURE	DATE
Full Name	Email Address
Home Mailing Address	Phone
Workplace	BFIS Quality & Credential Account Number

What Are You Sending?*(check all that apply)

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Training Certificate – In order to be verified, training certificates must include: <ul style="list-style-type: none">• Title and short description• Training dates, time and number of hours• Sponsor name with official logo/ letterhead• Your name | <input type="checkbox"/> Official or Unofficial Transcript |
| | <input type="checkbox"/> Certificate |
| | <input type="checkbox"/> Credential |
| | <input type="checkbox"/> License |

**Please do not submit documents already listed in your BFIS Quality & Credential Account. If you received a Documentation of Professional Development (DPD) form at your training, your attendance was already submitted by the training Sponsor.*

Why are you sending it? (check all that apply)

- | | |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input type="checkbox"/> I want to add it to my BFIS Quality & Credential Account | <input type="checkbox"/> I am applying for a Program Director Credential (Step 1, 2, or 3) |
| <input type="checkbox"/> I need to submit it for a Child Care Program Licensing Requirement | <input type="checkbox"/> I am applying for an Afterschool Certificate or Credential |
| <input type="checkbox"/> I am applying for an Early Childhood Career Ladder Level Certificate | <input type="checkbox"/> I want to submit it for the Instructor Registry |
| | <input type="checkbox"/> Other _____ |

WHERE TO SEND YOUR DOCUMENTS

MAIL: Northern Lights at CCV; Community College of Vermont, 1197 Main Street, Suite 3, St. Johnsbury, VT 05819
EMAIL: professional.development@ccv.edu (PDF documents strongly preferred)