OREGON REGISTRY
STEP APPLICATION (STEPS 3–12)

Pathways to Professional Recognition in Childhood Care and Education

Welcome to the Oregon Registry!
You provide a vital service to support families with children in our state. You are joining a community of professionals in Oregon committed to providing quality experiences for children and youth.

What is the Oregon Registry?
The Oregon Registry is a statewide program that records and recognizes the professional development growth of people who work with and for children. The Oregon Registry includes 12 steps representing increased training or education related to standards outlined in the Core Body of Knowledge for Oregon’s Childhood Care and Education Profession. Training and education is stored in the statewide database, also known as Oregon Registry Online (ORO), for many of Oregon’s professionals working in the field of childhood care and education. This training information is used by the Office of Child Care (OCC) Licensing, the DHS Enhanced Rate Program, and the Oregon Statewide Scholarship Program and Step Awards on the Oregon Registry.

Visit pdx.edu/occd for information on the programs and services of the Oregon Center for Career Development in Childhood Care and Education (OCCD) including the DHS Enhanced Rate Program, Oregon Statewide Scholarship Program, Oregon Registry Credential Program, and the Oregon Registry Trainer Program.
Oregon Registry Step Application Instructions

1. Review the Oregon Registry Step Application; all Registry forms and resources are at pdx.edu/occd.


3. Check out the Core Body of Knowledge for Oregon’s Childhood Care and Education Profession (pdx.edu/occd/sites/www.pdx.edu.occd/files/CoreBodyofKnowledge).


5. Complete the checklist below.

Need help? Contact your local Child Care Resource and Referral (CCR&R); to find your local CCR&R, call the Central Coordination of Child Care Resource and Referral at The Teaching Research Institute at 800-342-6712 or visit http://oregonccrr.com/.

Step Application Checklist

- Complete the following Step Application (pages 1-3).
- Check your Oregon Registry Professional Development Statement for your training listed in ORO.
  - Copy training and education documentation not listed in ORO to send with your Step Application.
- Applying for a Step 7.5-10 using community based training? Compose your Reflective Overview Statement found at http://www.pdx.edu/occd/forms-and-resources and send with your application.
- Make a $10 check or money order payable to PSU or request a waiver in writing (Section 7 of application).

Your Step Application takes approximately 45 business days to process when received complete.

Education Award (Optional) Checklist

- Complete the Education Award Eligibility Supplement Form (pages 1-3) (pdx.edu/occd/sites/www.pdx.edu.occd/files/EducationAwardEligibilitySupplementForm.pdf).

Your Education Award may take 30 business days to process after your Step is awarded.

Voluntary Professional Enhancements (Optional) Checklist

- List your work experience in the field.
- Prepare your personal attribute statements.

Voluntary professional enhancements are listed on your Oregon Registry Step certificate.

Tips

- Type or print clearly, using black or blue ink.
- Submit good-quality black-and-white copies of your documents, not originals.
- Ensure your success by taking your time at this stage of the application process.

Submitting Your Application

- Enrollment, Step 1, and Step 2 applications are free. There is a $10 processing fee for each Step 3–12 application. Please make a check or money order payable to PSU.
- Mail your completed application to: Portland State University – OCCD Attn: Oregon Registry Application PO Box 751 Portland, OR 97207-0751
Education Award Eligibility Supplement Form

This form is not required for an Oregon Registry Step but is required for an education award. You may qualify if:

- You work at a Office of Child Care (OCC) licensed facility or a Department of Human Services (DHS) active facility at least 20 hours a week (Option 1 or 2 below), and
- You work with children under the age of 13 or supervise staff in that capacity.

If you meet these requirements, you may receive the following award for the Milestone you achieve:

**Milestone 1:** $100 at Step 3 through Step 6 of the Oregon Registry

**Milestone 2:** $250 at Step 7 through 8.5 of the Oregon Registry

**Milestone 3:** $500 at Step 9 or above of the Oregon Registry

OR

You work in a license-exempt facility at least 20 hours a week with children under the age of 13 or supervise staff in that capacity (Option 3 or 4 below). If you meet these requirements, you may receive:

**Milestone:** $50 at Step 3 or above of the Oregon Registry

You may be eligible for only one milestone award in the fiscal year (July 1–June 30). When OCCD receives your completed forms and you meet the requirements for the education award, as funding is available, you will receive a confirmation letter with your Oregon Registry Step certificate. A payment issued by PSU will follow.

### Education Award Eligibility Section – Please Complete for Education Award

1. You, __________________________ (printed name), understand that this award may be considered taxable income and that if you are a Portland State University student, it may affect your financial aid. You also understand this form must be submitted with an Oregon Registry Application.

2. Are you currently a Portland State University Student?  [ ] Yes  [ ] No

3. Choose **one** eligibility option:

   [ ] **Option 1:** Staff of OCC licensed family child care home or DHS active family child care
   OCC Registration # RF: ________________________________
   OR DHS Provider #: _______________________________

   OR

   [ ] **Option 2:** Staff of OCC certified center or a certified family child care home or a DHS active center (you must have a supervisor complete the supervisor statement below; if your supervisor is not available, contact OCCD).

   OR

   [ ] **Option 3:** Staff of license-exempt facility (you must have a supervisor complete the supervisor statement below; if your supervisor is not available, contact OCCD).

   OR

   [ ] **Option 4:** Staff of license-exempt family child care home in Oregon.

4. **ALL Complete**

   Supervisor Name: __________________________

   OCC or DHS #: __________________________

   Facility Name: __________________________

   Address: __________________________

   **Supervisor/Owner Statement:** “I attest that the applicant is an employee of the above named facility and that the applicant works 20 or more hours per week with children younger than 13 years or supervises staff who work with children younger than 13 years.”

   **Supervisor Signature (required):**

   __________________________

   How do you plan to spend this Education Award?

   [ ] On my child care program  [ ] On myself or my family  [ ] On my training or education

   [ ] Other: (please specify)

   Remember, you must fully complete the Substitute W-9 Form (page 3).
Education Award: Substitute W-9 Form Instructions
Required for All Education Awards
According to Internal Revenue Service (IRS) Code, W-9 information is required for you to receive a payment, and according to Oregon Administrative Rule, a direct deposit (ACH) is required, unless you opt out. The Substitute W-9 Form and ACH Enrollment Form are combined in one page for your convenience (see next page). Send the completed Substitute W-9 Form with your application materials directly to OCCD.

Substitute W-9 Form Instructions
• If you want to receive the money, fill the form out with only your personal information, not your employer’s information.
• Provide a business name only if you file your taxes as a business using that name. If a business name is listed, checks will be made payable to the business.
• Provide an address because the payment will be mailed to this address if you choose to opt out of direct deposit (see ACH Instructions below). If you change your address before you receive payment, please notify OCCD.
• Provide only one tax identification number (TIN), which is usually your social security number, but if you file your taxes as a business, it may be your federal employer identification number (FEIN).

You must check at least:
1. One box indicating your U.S. citizen status AND
2. One box indicating your tax status (in most cases this will be Individual).
3. If you are a U.S. resident alien and do not want a tax exemption, check the U.S. Resident Alien box and complete the Substitute W-9. If you are a U.S. resident alien seeking a tax exemption or a foreign alien or entity, then you must check the appropriate box and complete a W-8 Form. See the back page of the Substitute W-9 Form for more information.
4. Sign and date the Substitute W-9 section.

Tax questions on how to fill out the Substitute W-9? Call the IRS Tax Help Line at 800-829-1040 or visit irs.gov.

ACH Instructions
To sign up for direct deposit to your bank account (ACH), fill out the following:
• Financial institution: Your bank/credit union name.
• Type of account: Either checking or savings.
• Bank ABA routing number: Nine-digit number found on the bottom of a check.
• Deposit account number: Your account number.
• Email address: Required so that you will receive notice of payment.
• Depositor account title: Name on the account.

Check the appropriate box, depending on whether or not your bank/credit union is outside the U.S.
✓ If your bank/credit union is not outside the U.S., skip the Additional Information but sign, date, and write in your telephone number (Title of Representative is not required).
✓ If your bank/credit union is outside the U.S., complete the Additional Information and sign, date, and write in your telephone number (Title of Representative is not required).

Return the form to OCCD with your Step Application.

You may choose to opt out of direct deposit. If you wish to opt out, read the statement below the ACH section and if you agree, check the box. Currently, there is no fee to receive paper checks, but there may be one in the future.
SUBSTITUTE W-9

We must have a Federal Tax Identification Number (FEIN) of Social Security Number (SSN) in our files for All VENDORS receiving payments from us. An IRS W-9 form may not be substituted in lieu of this form. For W-9 instructions, see www.irs.gov/pub/irs-pdf/iw9.pdf

NAME (as shown on your income tax return) ___________________________________________

BUSINESS NAME (if different from above) ____________________________________________

REMIT TO ADDRESS (number, street, apt. or suite no.) ____________________________________

(city, state and zip code) ____________________________________________

FEDERAL TAX ID NO. (FEIN) ________________ OR SOCIAL SECURITY NO. ________________

☐ U.S. Citizen ☐ U.S. Resident Alien- see back of this form
☐ Foreign Alien or Entity- Complete form W-8- see back of this form
☐ Nonprofit Entity ☐ Limited Liability Corporation- Individual
☐ Limited Liability Corporation- Complete form W-8- see back of this form
☐ Partnership ☐ Corporation
☐ Date of incorporation: __________________
☐ Limited Liability Corporation- Corporation
☐ Limited Liability Corporation- Partnership
☐ Emerging Small Business-state certified
☐ Woman Owned- State Certified
☐ Woman Owned- Self Reported
☐ Minority Owned- State Certified
☐ Minority Owned- Self Reported
☐ Emerging Small Business- self reported

CERTIFICATION:
Under penalties of perjury, I certify that
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined in the IRS W-9 instructions)

Certification Instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct taxpayer identification number. SIGN HERE

SIGNATURE OF INDIVIDUAL OR COMPANY OFFICIAL AND TITLE DATE:

ACH GO GREEN ENROLLMENT- SIGN UP AND SUPPORT ENVIRONMENTAL SUSTAINABILITY

FINANCIAL INSTITUTION __________________________________________________________ TYPE OF ACCOUNT (Choose one) ☐ Checking ☐ Savings

BANK ABA ROUTING NO. ________________________ DEPOSIT ACCOUNT NO. ________________________

EMAIL ADDRESS REQUIRED (Notice of Payment) __________________________

DEPOSITOR ACCOUNT TITLE __________________________________________________________

CHECK ONE OF THESE OPTIONS: ☐ The entire amount of the ACH deposit IS NOT deposited to a financial institution outside the U.S. (If this box is checked, sign the form, and return it to PSU at the address below.)
☐ The entire amount of the ACH deposit IS ultimately deposited to a financial institution outside the U.S. (If this box is checked, complete the following Additional Information, sign the form, and return it to PSU at the address below.)

ADDITIONAL INFORMATION:

Person/ Entity receiving the deposit ________________________ Receiver Bank ID No. ________________________

Payment Reason/ Remittance Information __________________________________________

Receiver’s Address (number, street, suite no.) _________________________________________

City, State, and Postal Code ______________________________________________________

We hereby authorize Portland State University in an effort to promote the University’s theme of environmental sustainability, to initiate CREDIT ENTRIES ONLY to our financial institution. We acknowledge that the origination of ACH transactions to our account must comply with the provisions of US law and that this information is to remain in full force and effect until Portland State University has received written notification from us of termination in such time and such manner as to afford Portland State University and the Financial Institution a reasonable opportunity to act on it.

A voided check for this bank account must be attached. No deposit slips please.

SIGNATURE: ________________________ TITLE OF REPRESENTATIVE: ________________________

DATE: ________________________ TELEPHONE: ________________________

☐ I, We opt out of ACH Direct Deposit to our Financial Institution from Portland State University. I, we understand that unless we are a current employee or a student of PSU, we will be subject to the provisions of Oregon Administrative Rule (OAR) 577-072-0030 effective as of January 1, 2010 and may incur additional charges for check processing.

Oregon Center for Career Development in Childhood Care and Education • 877-725-8535
OCCD-Portland State University • PO Box 751 • Portland, OR 97207-0751 • pdx.edu/occd

EDUCATION AWARD pg. 3 of 3

Revised May 2014