ECE Professional					
Participant ID Unique Identifier for ECE Professional Participating	ECE Facility ID ECE Facility ID (if applicable)	ECE Profession Is the ECE professional currently employed in childcare?	nal's Employment If they are currently employed, what is their role?	If their role is Other, please describe their role in the childcare facility where they work.	Certification Outco # of Certification Programs that the ECE Professional took during this FY
ece_participant_id.ece_professional_ id	ece_facility_id.ece_facility_i d	ece_prof_employme nt.ece_professional _current_employme nt	ece_prof_employment.ece_profess onal_role	e_other	ons_taken
Unique ID per ECE Professional participating. Please do not use the person's name, birthdate, or other private information as the ID.	Facility ID of the childcare facility where the participant is employed at the time of initial participation. DCDEE Facility ID using system lookup.	Data Entry Type: Drop Down, yes no Yes or no at the time of initial participation.	Data Entry Type: Drop Down, Child care Center Admin Child care Center Teacher Family Child care Home Provider Other	box for description of role	Data Entry Type: Whole number, Max of 30 Please only include certification programs that the ECE Professional was enrolled in and actively attending for at least the first 1-4 of the program.

omes

Name of Professional Certification(s) Participant was Working Towards

cert_outcomes.name_of_prof_ce rt

Data Entry Type: Text Entry

Please name or describe the certification. Please note that the certification should not be a college course with a grade associated, such as EDU 119, which would be higher education, not certification

	# of Certification Programs that the ECE Professional completed with a passing grade during this FY	ECE- For Cash and	Notes (Optional)			
# of Certification Programs that the ECE Professional registered for but did not completed with a passing grade during this FY		\$ Total amount of incentives paid during this year	Achievement associated with the distribution of Incentive	# of distributions of Incentives during the FY	Description of items purchases	
ert_outcomes.certifications_not completed Data Entry Type: Whole number, Max of 30 Please only indicate withdrawals after the first fourth of the program) and failed courses.	s_completed	ece_grants_shared.ece_t otal_incentives Data Entry Type: Whole Number, Max Value 100,000 Entire value of cash and non-cash grants provided as incentives during this FY; Only enter whole dollar amounts.	ece_grants_shared.ece_achi evement_incentive Data Entry Type: Text Describe the eligibility met or achievement that was obtained.	ece_grants_shared.ece_numb er_distributions_incentives Data Entry Type: Whole Number, Max Value 52 If multiple grants or payments were provided during the FY, indicate the number greater than 1. If a single grant was made, indicate 1.	ece_grants_shared.purchases Data Entry Type: Text Describe items purchased for the classroom/individual participant. If cash, state cash. Do not state other similar words such as dollars or payment.	