

NC Pre-K Teacher Assistant Add /Change Request SFY 2024-2025

1. Site Name: _____ Classroom Name in County Plan: _____
2. Teacher's Name: _____
First Middle Maiden Last
3. Teacher's Email: _____ Teacher's Contact Number: _____
4. Teacher's Workforce ID (WFID): _____
5. Request to: Add New Teacher Change Teacher
6. Teacher Type: Teacher Assistant Long-Term Sub Teacher Assistant
7. Date entered the NC Pre-K program this school year: _____ Returning Teacher Prospective Teacher
8. Did this teacher replace another NC Pre-K teacher in this classroom? Yes No If yes, whom? _____
9. Which of the following best describes this teacher's ethnicity? Hispanic Non-Hispanic
10. Which of the following best describes this teacher's race? *(Check at least one and all that apply)*
 American Indian/Alaska Native Asian Black/African American Native Hawaiian/Other Pacific Islander
 White/European American
11. Does the Teacher Assistant hold any of the following degree or credentials?
 BA/BS Major: _____ Date Issued: _____
 AA/AAS Major: _____ Date Issued: _____
 High School Diploma/GED: _____ Date Issued: _____
 CDA Date Issued: _____
12. Is the Teacher Assistant working toward a degree with a minimum of six semester hours per year?
 BA/BS Major: _____ Projected Issue Date: _____
 AA/AAS Major: _____ Projected Issue Date: _____

I certify that all of the above information is true and correct and my signature also confirms that the information provided on this form is accurate and complete.

I have enclosed the following documents if applicable to me:

- Copy of diploma or transcript with degree earned date
- Copy of credential (CDA)
- NC Pre-K Teacher Commitment Agreement form

Teacher Assistant's Signature Date

Site Administrator's Signature Date