



VIRGINIA DEPARTMENT OF
SOCIAL SERVICES

Directions
to join
Virginia's
Early Childhood
Professional Development
Registry



I M P A C T

Innovative Model for Professional Advancement & Career Tracking



IMPACT DIRECTIONS



- » Getting Started
- » Creating an **IMPACT** Account
- » Completing the **IMPACT** Application
- » Uploading Documents
- » Submitting the Application
- » Updating the Application
- » Printing Documents (My **IMPACT**)
- » Resources & Contact Information



GETTING STARTED



- 1 Before you begin, gather your documents and scan to create electronic copies
 - ◆ Highest diploma earned
 - ◆ College transcripts, showing all child-related coursework
 - ◆ Certificates, licenses and/or child-related credentials earned
 - ◆ Certificates for other child-related professional development

(Documents must be in an electronic form such as DOC, DOCX, TXT, GIF, PNG, PDF, etc.)



CREATE an **IMPACT** Account



② To join **IMPACT**, you must first create a new account. To do so, go to: www.vaimpactregistry.org

Click:
Register



Virginia Early Childhood Professional Development Registry

Register Log in

Resources Contact

 **Welcome to **IMPACT**!**

The **IMPACT** Registry is a voluntary, statewide tool to document and recognize the professional achievements of practitioners and trainers who work in the early childhood education and school-age care profession within the Commonwealth of Virginia.

The **IMPACT** Registry gathers and maintains data, submitted by individuals, and verified by Registry staff, bringing recognition and professionalism to Virginia's early childhood workforce.

The **IMPACT** Registry awards a Professional Development Certificate designating your Placement Level on the Career Pathways or Trainer/TA Provider Matrix. Each level represents increased training and education, indicating a commitment to early childhood education, and creating a pathway to career growth.

CREATE an **IMPACT** Account



If nothing happens when you click register, you may need to turn off your pop-up blocker. To do so, follow these directions:

▼ To turn Pop-up Blocker on or off

1. Open Internet Explorer by clicking the Internet Explorer icon on the taskbar.
2. Click the **Tools** button , and then click **Internet options**.
3. On the **Privacy** tab, under Pop-up Blocker, select or clear the **Turn on Pop-up Blocker** check box, and then click **OK**.



CREATE an **IMPACT** Account



- ◆ Enter your Email
(this will become your user name)
- ◆ Enter your First, Middle Initial and Last Name
- ◆ Enter your Phone Number
- ◆ Enter your Mailing Address, City, State and Zip Code
- ◆ Enter your Date of Birth
- ◆ Create a Password
- ◆ Confirm your Password
- ◆ Read and agree to the Acknowledgement Statement
- ◆ Click “Register”

Passwords must have at least:

- One number (0-9)
- One special character (!@&#%\$)
- One lowercase character ('a'-'z')
- One uppercase character ('A'-'Z')
- 8 characters total



CREATE an **IMPACT** Account



Acknowledgement Statement and Applicant Signature

I certify that the information contained in this application entered and stored in the Virginia Professional Development Registry (VPDR) employees and agents for any claims made against them.

This application is complete and accurate to the best of my knowledge. I understand that this information will be used in the Virginia Professional Development Registry (VPDR) database. I hereby agree to indemnify the Virginia Department of Social Services (DSS), its employees and agents for any claims made against them arising out of or connected with the information contained in my application and provided in conjunction with it. Said indemnification shall also apply to any claims arising from my subsequent professional placement. I understand that DSS is a public entity that is required to protect the confidentiality of personal information (Code of Virginia § 2.2 - 3801) to the extent permitted under state and federal law and regulation.

DSS may collect the following personal information in the VPDR:

- * Name, Address, Telephone/Fax numbers, e-mail and birth date
- * Employment history
- * Education/training history

I understand there is the potential for disclosure of non-personal information in response to a Freedom of Information Act (FOIA) request.

I recognize that my continuing membership with or participation in the VPDR is on an annual renewal basis. I will submit all information requested within the application or renewal period. Should I receive a written request for clarification of the submitted documentation, I will cooperate fully with the staff of DSS and its authorized agent(s) and submit this requested information within 30 days of the written request.

I understand that documentation that cannot be verified will not be considered in my Career Lattice Step Level placement.

I understand that my name will not be released to advertisers. Social security numbers will be masked in the VPDR and will not be provided to any partners for any reason.

I understand that the authorized entity will provide me the user with secure access to view my information through the System.

I understand that the host entity requires secure communication via internet browser for all users of the System. These security levels shall remain current with the requirements of all state and federal laws related to electronic access and database storage by governmental entities.

I understand that the information in my file may be used for the following purposes:

- * The compilation and publication of group data reports and recognition of a member's educational attainments.
- * The compilation and publication of group data reports and recognition of a member's educational attainments to improve the quality and services of the early childhood development and
- * The release of aggregate data compiled to aid planning and education efforts.

I Agree

Don't forget to read and agree to the Acknowledgement Statement!

Then click: "Register"

Confirm password

Register



CONFIRM EMAIL ADDRESS



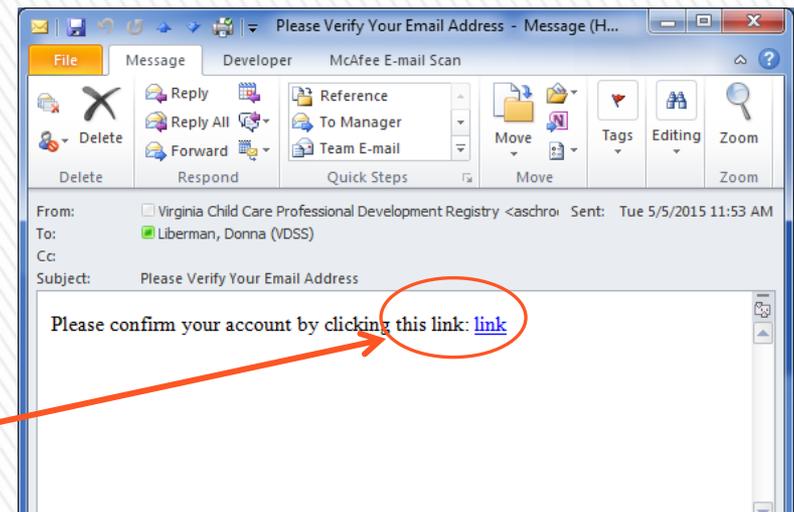
Virginia Early Childhood Professional Development Registry

Confirm your email address.

Please check your email and confirm your email address. Check your email and confirm your account, you must be confirmed before you can log in.

You will need to confirm your email address to complete the account registration.

When you receive the automatic email notification asking you to confirm your account registration, click on the link provided.



LOG IN



Now you have an **IMPACT** account and can enter your information into the Registry.

To do so, you will need to log in to your account. Click on the link.



LOG IN



- ◆ Enter your email address
- ◆ Enter your password
- ◆ Click on the link to log into your account.

If you have forgotten your password, click on the link to get help.

Virginia Early Childhood Professional

Resources Contact

Log in.

Use a local account to log in.

Email

Password

Remember me?

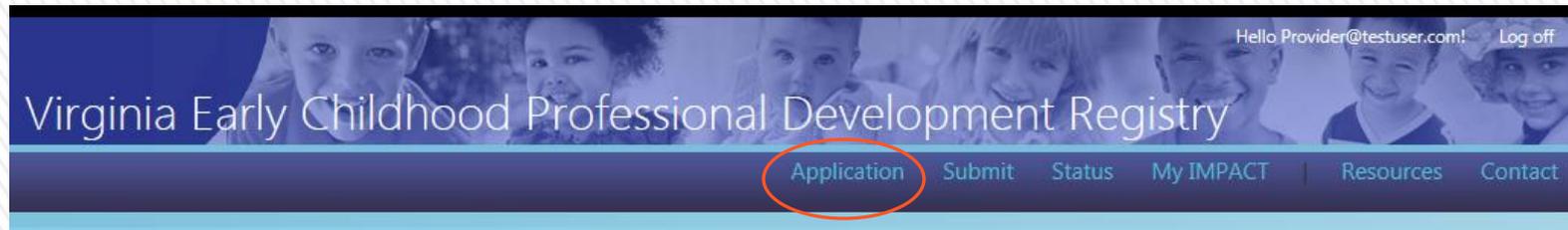
Log in

Register a new user?

[Forget your password?](#)



COMPLETE APPLICATION



3 Complete the Application

- ◆ Click on the “Application” link
- ◆ Complete the fields in the following categories
 - ◆ Background Information
 - ◆ Employment History
 - ◆ Formal Education
 - ◆ Other College Coursework Completed
 - ◆ Professional Credentials
 - ◆ Other Training & Professional Development
 - ◆ Leadership & Professionalism
 - ◆ Trainer/TA Provider Questions



APPLICATION



Virginia Early Childhood Professional Development Registry

Application Submit Status My IMPACT Resources **Contact**

General Application Information:

- ◆ All sections and fields may be left blank, if not applicable.
- ◆ If you have questions, you may contact Registry Staff, via email, at any time.
- ◆ You do not need exact dates for degrees earned; you may enter the first day of the month and year.

(For example, enter 6/1/1991 for a June graduation.)

Background Information	
Are you seeking a Placement Level on the Career Pathways for Early Childhood and School-Age Practitioners?	Yes
Are you seeking a Placement Level on the Trainer and TA Provider Matrix?	No
High School Name	Richmond High School
Date of High School Graduation	06/02/2000
Highest Education Level Achieved	Master's Degree
In the future, I plan to obtain:	Doctorate
Have you ever received a Virginia Department of Social Services scholarship to pay for any training?	Yes
Gender	F
Are you of Hispanic or Latino origin?	Yes
Which of the following best describes your racial group?	Black or African American
Primary Language	English
If other, please specify	
Secondary Language	Spanish
If other, please specify	
Do you have a current Emergency First Aid, CPR & AED Training Certificate?	Yes
If yes, Expiration Date:	07/08/2016
Do you have a current Child Abuse & Neglect Recognition and Intervention Training Certificate?	Yes
If yes, Expiration Date:	07/08/2016

Background Information:

- ◆ If a high school diploma is your highest level of education, you can upload this documentation on the formal education page
- ◆ If you do not speak a second language fluently, leave the question blank



APPLICATION



Career Pathways:

- ◆ The Career Pathways for Early Childhood & Out-of-School Time Practitioners recognizes the hours of informal training, formal education and professional credentials of practitioners who work in the field of early childhood and school age care. Check “yes” if you would like to receive a certificate indicating your Placement Level.
- ◆ If you check “yes” you will need to upload the required documentation, to demonstrate proof of your education and credentials.
- ◆ Use the Career Pathways to plan your training, education and career development goals.

Background Information	
Are you seeking a Placement Level on the Career Pathways for Early Childhood and School-Age Practitioners?	Yes
Are you seeking a Placement Level on the Trainer and TA Provider Matrix?	No
High School Name	Richmond High School
Date of High School Graduation	06/02/2000
Highest Education Level Achieved	Master's Degree
In the future, I plan to obtain:	Doctorate
Have you ever received a Virginia Department of Social Services scholarship to pay for any training?	Yes
Gender	F
Are you of Hispanic or Latino origin?	Yes
Which of the following best describes your racial group?	Black or African American
Primary Language	English

Registry-Approved Trainers & TA Specialists:

- ◆ The Trainer/TA Provider Questions are for trainers, mentors, coaches and TA specialists who are seeking a Designation as a Registry-Approved Trainer.
- ◆ Check “yes” if you would like to receive a certificate indicating your Designation Level as a Registry-Approved Trainer/TA Specialist.
- ◆ If you check “yes,” you will need to upload the required documentation, to demonstrate proof of your education and credentials, and complete the Registry-Approved Trainer Orientation.

Future Application



APPLICATION



Background Information	
Are you seeking a Placement Level on the Career Pathways for Early Childhood and School-Age Practitioners?	Yes
Are you seeking a Placement Level on the Trainer and TA Provider Matrix?	No
High School Name	Richmond High School
Date of High School Graduation	06/02/2000
Highest Education Level Achieved	Master's Degree
In the future, I plan to obtain:	Doctorate
Have you ever received a Virginia Department of Social Services scholarship to pay for any training?	Yes
Gender	F
Are you of Hispanic or Latino origin?	Yes
Which of the following best describes your racial group?	Black or African American
Primary Language	English
If other, please specify	
Secondary Language	Spanish
If other, please specify	
Do you have a current Emergency First Aid, CPR & AED Training Certificate?	Yes
If yes, Expiration Date:	07/08/2016
Do you have a current Child Abuse & Neglect Recognition and Intervention Training Certificate?	Yes
If yes, Expiration Date:	07/08/2016

Saved

The Registry automatically saves information as you go, but please ensure that it says “Saved” before moving to the next section of questions.



APPLICATION



Employment History	
Employer Name	Great Employer
Employer Address 1	Convenient Address
Employer Address 2	address continued
Employer City	Richmond
Employer State	VA
Employer Zip Code	23219
Supervisor Name	Nice Supervisor
Supervisor Phone	8041234567
Supervisor Email	supervisor@email.co
Do you work directly with children?	Yes
If yes, what is the primary age group of the children you work with?	Infants/Toddlers (0-3
Position	Assistant Teacher
Position Description	Come to work. Play i
Type of Facility	Center-based
Type of Program	Licensed
Do you work for a VPI+ program?	Select Item
Is your position considered full time?	Yes
How many hours do you work, on average, per week?	40+ hrs
How many months do you work, on average, per year?	12
Hourly Wage	minimum wage
Date of last wage increase, if applicable	Within Last 3 Months
Date of last bonus/incentive, if applicable	Within Last 3 Months
Do you receive any benefits along with your salary?	Yes
Start Date	05/01/2015
End Date, if applicable	05/12/2015
Reason for leaving this position, if applicable	Better Opportunity -
Does this facility have a QRIS rating?	Yes
Add Another Section	Upload Supporting Files

Employment History:

- ◆ Please enter child-related work history **ONLY**, beginning with your current employment.
- ◆ If you wish to enter more than one employment record, click on “Add Another Section.”
- ◆ If you wish to upload a resume, click on “Upload Supporting Files.”
- ◆ You may enter as many employment records as you would like. The information will be available for download on the **IMPACT** Portfolio.

Note: Once you click on “add another section” the screen will revert back to the beginning. Scroll down to find the additional section with a “2, 3, 4 etc.” by the section name

▶ Employment History

▶ Employment History (2)

APPLICATION



Formal Education:

- ◆ Please enter information for all degrees earned, whether child-related or not.* (There will be an opportunity later to submit child-related college credits.)
- ◆ If you have more than one degree to enter, click on “Add Another Section.”
- ◆ If you wish to upload a diploma, click on “Upload Supporting Files.”
- ◆ You may enter as many degrees as you would like. The information will be available for download on the **IMPACT** Portfolio.

Formal Education	
College/Institution Name	Other
If other, please specify	University of Maryland, College Park
Major	Educational Psychology
Minor, if applicable	Child Development
Number of college credits completed	38
Date Degree Earned, if applicable	04/20/2015
Type of degree earned, if applicable	Master's Degree
Add Another Section	Upload Supporting Files

Note: You only need to upload the diploma for the highest degree earned. You will need to provide transcripts though, for all child-related college credits earned.

***If you have not earned a college degree, you may skip this section.**



APPLICATION



Other College Coursework Completed :

- ◆ Please enter information for all child-related college credits earned.*
- ◆ If you have more than one course to enter, click on “Add Another Section.”
- ◆ If you wish to upload transcripts, click on “Upload Supporting Files.”
- ◆ You may enter as many college courses as you would like. The information will be available for download on the **IMPACT** Portfolio.

Other College Coursework Completed	
College/Institution Name	University of Virginia
If other, please specify	
College Course Prefix and Number	EDU 235
Name of College Course	Health/Safety/Nutrition
Date College Course Completed	05/08/2015
Number of Hours Earned	3
Type of Hours Earned	Semester Hours
Add Another Section	Upload Supporting Files

Type of Hours Earned

Semester Hours: describe the credits from a college or university that uses the two semester (15-weeks each) calendar.

Quarter Hours: describe the credits from a college or university that divides up the academic year into four 10- week quarters.

CEU's should not be chosen for “Other College Coursework Completed”

***If you have not earned any college credits, you may skip this section.**

APPLICATION



Professional Credentials:

- ◆ Please enter information for all certificates, licenses and endorsements earned.*
- ◆ If you have more than one credential to enter, click on “Add Another Section.”
- ◆ If you wish to upload certificates, click on “Upload Supporting Files.”
- ◆ You may enter as many credentials as you would like. The information will be available for download on the **IMPACT** Portfolio.

Professional Credentials	
Name of Credential	First Aid
Type of Credential	Certification ▼
Awarding Organization/Institution	Red Cross
Date Awarded	05/09/2015
Date expires, if applicable	05/10/2016
Endorsement Type, if applicable	Select Item
License Number, if applicable	
Add Another Section	Upload Supporting Files

*If you have not earned any certificates, licenses or endorsements, you may skip this section. 

APPLICATION



Other Training & Professional Development:

- ◆ Please enter any other training and professional development you have taken (not college courses.)*
- ◆ If you have more than one training to enter, click on “Add Another Section.”
- ◆ If you wish to upload certificates or proof of attendance, click on “Upload Supporting Files.”
- ◆ You may enter as many trainings as you would like. The information will be available for download on the **IMPACT** Portfolio.

Other Training & Professional Development	
Trainer Name/Company	Sally Trainer
Training Location	Accomack ▼
Title of Training Session	Feeding babies
Training Session Type	Workshop/Class/Seminar ▼
Core Competency Area	Health, Safety & Nutrition ▼
Age Group	Infants/Toddlers (0-3) ▼
Date Completed	05/07/2015
Number of Hours Earned	1
Type of Hours Earned	CEUs ▼
Add Another Section Upload Supporting Files	

***If you do not have any other training or professional development to add, you may skip this section.**

APPLICATION



Leadership & Professionalism

Have you ever taught a college-level class?

Yes

Have you ever conducted training to other teachers/staff?

No

Have you ever provided mentoring or peer evaluation?

Yes

Have you ever facilitated a staff or teacher meeting?

No

Have you ever attended a professional conference?

Yes

Do you belong to an Early Childhood Professional Association?

No

Have you ever served on a professional advisory or task force?

Yes

Have you ever been published in an article, journal or textbook?

No

Leadership & Professionalism:

- ◆ These questions are optional, and are used to demonstrate the breadth and wealth of leadership and professionalism within the early childhood and school-age care community.



APPLICATION



Trainer/TA Provider Questions

I am applying for:	Select Item
Training/TA Areas of Expertise	Select Item
Training/TA Location	Select Item
Training/TA Age Group Focus	Select Item
Training/TA Target Audience Level	Select Item

[Upload Supporting Files](#)

Trainer/TA Provider Questions:

- ◆ The Trainer/TA Provider Questions are required for trainers, mentors, coaches and T/A specialists who are seeking a Designation as a Registry-Approved Trainer.
- ◆ Other requirements include:
 - ◆ Uploading supporting documents:
 - ◆ Highest diploma earned
 - ◆ Transcripts
 - ◆ Resume
 - ◆ 2 Letters of Reference
 - ◆ Proof of completion of adult learning course
 - ◆ Completion of the VDSS Trainer Orientation

Future Application



UPLOAD DOCUMENTS



4 Accepted Documentation

- ◆ High School and/or College Diploma(s) (highest level only)
- ◆ College Transcripts (for all child-related college courses)
- ◆ Licenses
- ◆ Endorsements
- ◆ Certificates for:
 - ◆ All child-related professional development
 - ◆ Specialty field professional development
 - ◆ First Aid/CPR, Child Abuse & Neglect
 - ◆ Early childhood/career studies program
- ◆ Proof of attendance for other professional development and training courses
- ◆ Resume
- ◆ Letters of Reference

Note: Uploading documents is only required if you are seeking a Placement Level on the Career Pathways for Early Childhood and Out-of-School Time Practitioners or a Designation Level as a Registry-Approved Trainer/TA Specialist.

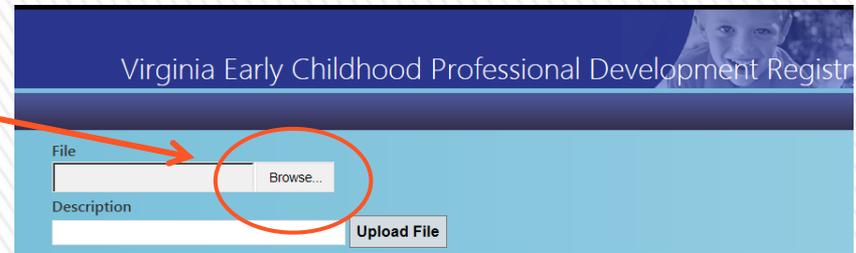
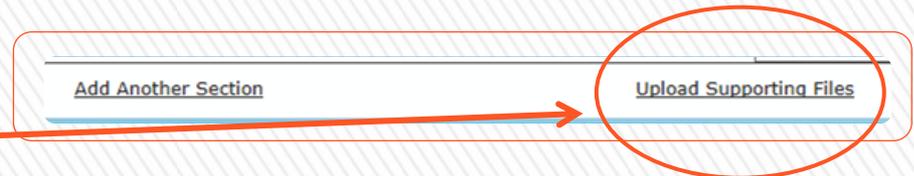


UPLOAD DOCUMENTS



To upload a document:

- ◆ Click on “Upload Supporting Files”
- ◆ Click on the “browse” button to locate the document you wish to upload
- ◆ Use the description field to state the type of document you are uploading, for example: (resume, transcripts, CPR certificate, etc.)
- ◆ Click on “Upload File”
- ◆ Your uploaded documents will appear under the Category and File Name.



[Return to Application](#)

Category	File Name		download	delete
Employment History1	Resume.docx	Resume	download	delete
Formal Education1	College Transcripts - Germanna.docx	Germanna transcripts	download	delete
Formal Education1	College Transcripts - UMW.docx	bachelor's degree	download	delete
Professional Credentials1	School-Age Endorsement.docx	school age training	download	delete

You can delete a document if you need to, by clicking, “delete.” You can download a document any time by clicking, “download.” To go back to the application, click on, “Return to Application.”



SUBMIT APPLICATION



5 Submitting Your Application:

- ◆ When you have completed entering all of your information, and uploading documents, you may submit your application for review and Career Pathways Placement Level/Registry-Approved Trainer/TA Specialist Designation.
- ◆ If you have additional items to enter, **DO NOT SUBMIT YOUR APPLICATION**. Log out, and log back in to complete the application at another time
- ◆ All information will be saved in your account (as long as the system finished saving before you moved to a new section)
- ◆ You may log back in at any time, to add information or upload additional documents
- ◆ You may want to go back and review to identify errors or missing information before the application is submitted



- ◆ Click on “Submit”
- ◆ Submitting your application for verification will send all of your application information as it is currently entered
- ◆ If your application looks complete, click on “Submit” again

Submit Application for Verification

Submitting your application for verification will send all of your application information as it is currently entered.

[Submit for Verification](#)

Note: Once your application is submitted, it will not be available to update or add additional items until Registry staff unlocks it for editing. This will occur after your Placement Level designation.



UPDATE APPLICATION



6 Updating Your Application:

- ◆ After you click “submit,” your application will not be available for editing until after you receive your Career Pathways Placement Level or Registry-Approved Trainer/TA Specialist Designation.
- ◆ If you wish to make immediate changes or updates you will need to contact Registry staff.
- ◆ As soon as you have received your Placement Level Designation, the application will be available for editing and/or updating.



Child Care Professional Registry Application

Application

There are currently no application sections open for editing. All sections have been submitted for Validation. You can view the status of your application's verification by selecting the "Status" menu item above.



PRINTING DOCUMENTS



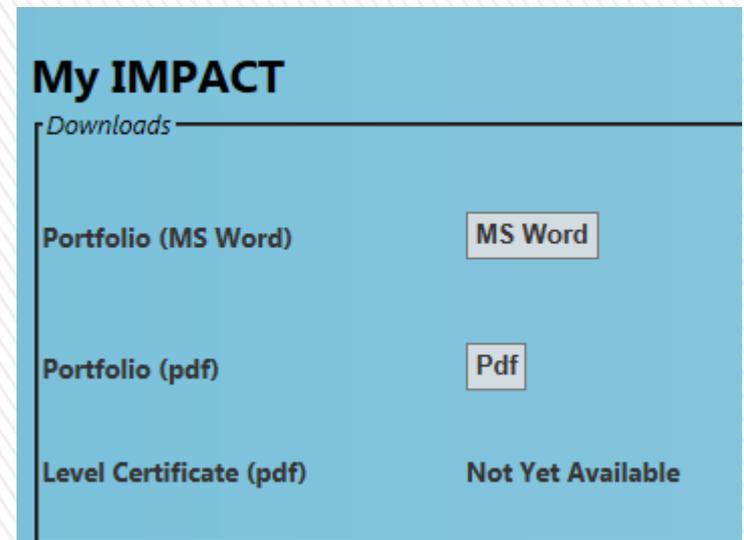
7 My IMPACT

Certificate:

- ◆ You will receive a notification when your status is updated. At that time, you may log back in and go to My IMPACT to obtain your certificate.
- ◆ To print your certificate, click on the link to print.
- ◆ You can save your certificate to another location, by clicking on print, and then selecting “save as.”

Portfolio:

- ◆ Follow the same directions to print and/or save your portfolio.
- ◆ You have the option of opening your portfolio as a PDF or a Word document that you can modify as needed.



RESOURCES & CONTACT INFO



8 Getting Help:

Resources and Documents:

- ◆ You will find a large variety of resources under this tab, categorized by:
 - ◆ Professional Development
 - ◆ Higher Education
 - ◆ Professional Associations
 - ◆ Teacher Resources
- ◆ There is also a listing of documents that you may find useful
- ◆ Check back here often to see new and updated resource items



Contact Information:

If you need assistance with the application, or have any questions about the Registry or the process for joining, click on the Contact tab for contact information.

Helpful Links:

- ◆ [Career Pathways](#)
- ◆ [Frequently Asked Questions](#)
- ◆ [Registry Checklist](#)





VIRGINIA DEPARTMENT OF
SOCIAL SERVICES

**Virginia's
Early Childhood
Workforce
is
Making an**



I M P A C T

