

## Associate of Technical Studies – Education (ATED)

### Prospective Student Information

Upon completion of the Associate of Technical Studies-Education (ATED) degree, students will be qualified to work as a paraprofessional or aide in a classroom setting P-12 and pursue an additional degree at a four-year college. The ATED degree is a two-year degree, and the first step for students who want to achieve their educational and career goals.

The courses in the ATED program are designed to help students gain the knowledge, skills, and dispositions that will help them be successful in the field of education. In addition, the program can be customized with the opportunity to choose technical electives that meet each student's future goals. The attached handbook will provide more specific information about the program. Interested students may call Lindsay Carr, in the Education Department, at (740) 588-4120, or the One Stop, (740) 588-5000, for additional information or to set up an appointment to visit the College.

Specific information regarding the program is attached.

**Application Deadline: Before classes begin each semester**



#### **FACULTY:**

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## GENERAL INFORMATION

### ASSOCIATES OF TECHNICAL STUDIES – EDUCATION (ATED)

Education is a continuously growing and changing field of study. By enrolling in the Associates of Technical Studies - Education (ATED) program, students gain a foundation to prepare them for the next step in education, regardless of the goal. The ATED is the perfect degree for individuals who want to pursue an additional degree at a four-year college. Students can select a concentration to meet their interests, which can range from teaching grades K-12 or working as an intervention specialist.

With the opportunity to choose technical electives to meet a student's future goals, the program truly can be as unique as every student and child. By enrolling in education, special education, child development, classroom management, and education technology classes, graduates will be qualified to enter the field of education as a teacher's aide through grade 12. An individual in one of these positions would be expected to work with a teacher to ensure student success in learning. This can be accomplished through one-on-one instruction, small group lessons, assistance in classroom management, and routine task completion.

Individuals in a classroom are expected to:

1. Have the energy and mobility to move readily from one individual or group of children to another.
2. Work with students from a wide range of abilities and cultural backgrounds.
3. Be able to handle classroom situations with fairness and patience.
4. Be alert (visual, auditory, and mental) to all children and situations in the classroom.
5. Demonstrate initiative and a willingness to follow directions.
6. Maintain accurate documentations that support student learning.
7. Guide and direct students without being abusive.
8. Respect individual differences.
9. Transfer, generalize and apply knowledge.
10. Model socially acceptable behaviors.
11. Have knowledge and understanding of child development.
12. Have good oral and written communication skills.

#### Liability Insurance

Students are required to purchase professional and personal liability insurance for all field and clinical experiences. This insurance is attached as a course fee for necessary courses and therefore billed with tuition.

#### Program Retention

Minimum guidelines for academic standards may be found in the College Catalog.

In addition, candidates with a grade of D or below in any course will meet with his/her program advisor to:

1. Determine the feasibility of continuing in the program. The candidate may be referred for career counseling.
2. Decrease the course load to a maximum of 15 credit hours.

A candidate who subsequently earns a D or lower in a course can continue only with the approval of the Education Department Chair or the Dean of Education, Health and Behavioral Services.

### Comprehensive Field Practicum Requirements

This degree requires no comprehensive field hours. Opportunities to explore the field are required during the child development and observation and assessment classes. These hours total 45 hours spent in the field of education.

### Field Placements

For field placements you may be placed initially in a pre-K setting, but future goals will be considered to create the best match possible. Because of site availability, students may be required to drive up to an hour one way (timed from the Zanesville campus) to a site.

### Exit

Zane State College policy states that candidates receiving a grade of “D” or below in any technical or specified foundational course required by the program has these options:

- a. Assume a general studies core status;
- b. Withdraw from the respective program; or
- c. Remain in the technical program, taking the technical course (on advisement of Advisor) for which the candidate has achieved a grade of “C” in the prerequisite course. General and basic courses may be taken at this time, also. The candidate must then repeat any course in which he or she did not achieve at least a “C” grade. (Note that the College does not offer each course every semester.) Candidates may repeat the course only once to raise the grade to the “C” level. Upon successful completion of the repeated course (grade of at least a “C”), the candidate must then be reevaluated for continuation in the program. Due to the arrangements of the curriculum sequence, this will probably require an extra year in the program.

Should the candidate be unsuccessful upon the repeat of a course, he/she will not be permitted to continue in the program. In such an instance, this will be communicated to the candidate by the Education Department Chair in cooperation with the office of the Dean of Education, Health and Behavioral Services. Candidates will be referred to the Student Success Center for career counseling or an exit interview from the College.

## CHECKLIST OF REQUIREMENTS

### Admission to Program

The candidate must be admitted to the college before admission to the program. See the College catalog for college admission procedures.

### Conditional Acceptance

The following conditions must be met before conditional acceptance occurs.

- 1. Written communication examination must be completed (Accuplacer).
- 2. Math placement exam completed (Accuplacer).
- 3. Be prepared to successfully \* undergo a BCI (and FBI) criminal records check. This can be processed at the Campus Bookstore and paid for with financial aid (if eligible) or at a local law enforcement agency. Due to the fact that these checks have an expiration date, it is best to check with the Education Department Chair before taking this step.

\*Refer to the back of the attached JFS 01328 Statement of Non Conviction for Prohibited Offenses.

\*The BCI check cannot be completed until a student is 18 years of age due to a minor status.

In addition to the BCI letter, a candidate enrolled in a course with laboratory contact hours with children (EDUC 1110, EDUC 1830, etc.) must have on file with the Education Department Chair the following materials:

- 1. A background check (BCI check). The BCI **MUST** be addressed to Zane State College. If you have not had a BCI done or if it is over one year old, a new one needs to be done. This can be processed at the campus bookstore with your financial aid. If you have a BCI for your job site, you can request a reissuance from the state to be sent to Zane State College. The Education Department has the form for this.
- 2. A signed Statement of Non-Conviction stating that the individual has not been convicted of or plead guilty to child abuse or other crimes of violence (JFS 01328).
- 3. Three letters of recommendation on specified form (JFS 01300).
- 4. A medical statement on specified form (JFS 01296).
- 5. Child Guidance and Management Policy (5101:2-12-22).

These forms are attached. They are also filled out in Introduction to Education (EDUC 1010), available at [jfs.ohio.gov](http://jfs.ohio.gov), or can be obtained from the Education Department Chair.

## **Formal Acceptance to the Program**

The candidate must have completed 15 credit hours of coursework, including successful completion of Introduction to Education (EDUC 1010), before formal acceptance is considered. The candidate must have a C or above in program courses and maintain an overall GPA of 2.0.

Conditions for formal acceptance:

- ❑ 1. Have 2.00 or better in Education courses.
- ❑ 2. Is in academic good standing with the College.
- ❑ 3. Have a complete, current packet of required forms (mentioned above) on file with the Education Department Chair.

Admission to the program occurs upon completion of Introduction to Education (EDUC 1010).

Please indicate the type of background check you are requesting:

BCI                       FBI                       BCI & FBI

**Personal Information (please print):**

**Type of Photo ID and # \_\_\_\_\_**

Name: \_\_\_\_\_

Phone# \_\_\_\_\_

Date of Birth \_\_\_\_\_ SSN: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Class (circle one): EDUC 1010, EDUC 1110, EDUC 1830, EDUC 2300, EDUC 2950, ECED 2270, ECED 2850 ECED 2920

Sex \_\_\_\_\_ Race \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_

**Direct Copy to (underline only one)**

FBI Reason Code Volunteer Children's Act

BCI Reason Code (Other)Responsible for children and elderly

- BMV Dealer Licensing
- BMV Deputy Registrar
- Child Care Car/Type A ODJFS
- Dietetic Board
- Lottery Commission
- None
- OPOTA
- Ohio Board of Nursing
- Ohio Department of Education
- Ohio Department of Liquor Control
- Ohio Department of Public Safety/PISG
- Ohio Insurance
- Ohio Racing Commission
- Respiratory Care Board

Mail to:

Zane State College  
1555 Newark Road  
Zanesville, Ohio 43701  
ATTN: Education Department

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize the Ohio Bureau of Criminal Identification & Investigation to conduct a criminal records check for the information relating to me. I also voluntarily and knowingly authorize BCI&I to disseminate criminal arrest, conviction, and juvenile delinquency adjudication records to \_\_\_\_\_ . I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BCI&I and their employees from all claims and liability related to this authorized criminal record review and dissemination.

\_\_\_\_\_  
Applicant's Name (please print)

\_\_\_\_\_  
Witness Name (please print)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Parent/Guardian Name (please print)

**By signing this form, the applicant acknowledges that all information on this form is accurate. Any mistakes or errors on this form are the responsibility of the applicant.**

**STATEMENT OF NONCONVICTION FOR CHILD CARE CENTERS AND TYPE A HOMES**

This statement must be signed upon hire and annually thereafter by every: individual owner, administrator, employee, second adult in a child care center or type A home and all persons 18 years of age and older who reside in a type A home. This statement must be kept on file at the center or home.

Name (please print or type)		Date of Hire	
<input type="checkbox"/>	I hereby attest that I have never been convicted of or pleaded guilty to crimes set forth in divisions (A)(8) or (A)(9) of section 109.572 or division (A)(1) of 5104.09 of the Revised Code and that no child has been removed from my home as described in section 2151.353 of the Revised Code.		
<input type="checkbox"/>	I have had a child removed from my home as described in section 2151.353 of the Revised Code.		
<input type="checkbox"/>	I have been convicted of a crime included in divisions (A)(8) or (A)(9) of section 109.572 or division (A)(1) of 5104.09 of the Revised Code.		
Signature of Person Completing Form		Date	
Street Address			
City	State	Zip Code	Telephone Number
<input type="checkbox"/>	I have reviewed the rehabilitation requirements of rule 5101:2-12-26 or 5101:2-13-26 of the Administrative Code, and determined that the employee meets the rehabilitation requirements. I have attached a completed copy of the JFS 01206 and the documents to verify how these requirements have been met. <b>This section requires a signature only if the employee is rehabilitated.</b>		
Administrator's Signature (+)		Date	

**Note:** Anyone who withholds information from, or falsifies information on this statement is guilty of falsification, a misdemeanor of the first degree. If the offender is an owner of a center or a licensee of a type A home, a type B home provider, or an in-home aide, the conviction constitutes grounds for denial, revocation, or refusal to renew a child care license application or child care certification. If the offender is an employee of a center or type A home, or is a person eighteen years of age or older who resides in a type A or type B home or is an emergency or substitute caregiver, and if the owner or licensee had knowledge of, and acquiesced in the commission of the offense, the conviction constitutes grounds for denial, revocation, or refusal to renew a child care license application or child care certification.

**Note:** effective June 1, 2008 all civilian background checks must be submitted electronically through use of WebCheck or other approved methods. More information can be found at:  
<http://www.ohioattorneygeneral.gov/Services/Business/WebCheck>

**▼ CENTERS AND TYPE A HOMES**

The administrator is required to sign and date below verifying that fingerprints have been electronically submitted to the Ohio Bureau of Criminal Identification and Investigation (BCII), or mailed if electronic processing exemption criteria are met.

A criminal records check for the above named individual was requested on (date) \_\_\_\_\_

Ohio BCII records check     Federal Bureau of Investigation (FBI) records check (please check)

Signature of Administrator(+)

Date

**▼ TYPE A HOMES ONLY**

The licensee of a type A home must sign the following statement: I hereby attest that no one who resides in my home and who is under eighteen years of age has been adjudicated a delinquent child for committing a violation of any offense listed in divisions (A)(8) or (A)(9) of section 109.572 or division (A)(1) of 5104.09 of the Revised Code.

Signature

Date

**▼ TO BE SIGNED BY THE ADMINISTRATOR**

I have reviewed the results of this persons criminal records check on the following dates: \_\_\_\_\_ Ohio BCII records check, \_\_\_\_\_ FBI records check. Section 5104.012 (A)(2) of the Revised Code requires the results of these records checks to be reviewed and approved by the administrator prior to the employee having sole responsibility for children.

Signature of Administrator(++)

Date

(+)(++) Administrators need to sign this section only when a new BCII or FBI criminal records check is requested (+) or completed (++)

This is a prescribed form which must be used to meet the requirements of rules 5101:2-12-26 and 5101:2-13-26 of the Administrative Code.

## Prohibited Offenses

### Homicide

- R.C. 2903.01 - Aggravated murder
- R.C. 2903.02 - Murder
- R.C. 2903.03 - Voluntary manslaughter
- R.C. 2903.04 - Involuntary manslaughter

### Assault

- R.C. 2903.11 - Felonious assault
- R.C. 2903.12 - Aggravated assault
- R.C. 2903.13 - Assault
- R.C. 2903.16 - Failing to provide for a functionally impaired person

### Menacing

- R.C. 2903.15 - Permitting child abuse
- R.C. 2903.21 - Aggravated menacing
- R.C. 2903.211 - Menacing by stalking
- R.C. 2903.22 - Menacing

### Patient abuse and neglect

- R.C. 2903.34 - Patient abuse, neglect

### Kidnapping and related issues

- R.C. 2905.01 - Kidnapping
- R.C. 2905.02 - Abduction
- R.C. 2905.04 - Child stealing (as this law existed prior to July 1, 1996)
- R.C. 2905.05 - Criminal child enticement

### Sex offenses

- R.C. 2907.02 - Rape
- R.C. 2907.03 - Sexual battery
- R.C. 2907.04 - Unlawful sexual conduct with a minor
- R.C. 2907.05 - Gross sexual imposition
- R.C. 2907.06 - Sexual imposition
- R.C. 2907.07 - Importuning
- R.C. 2907.08 - Voyeurism
- R.C. 2907.09 - Public indecency
- R.C. 2907.12 - Felonious sexual penetration (as this former section of law existed)
- R.C. 2907.21 - Compelling prostitution
- R.C. 2907.22 - Promoting prostitution
- R.C. 2907.23 - Procuring
- R.C. 2907.25 - Prostitution
- R.C. 2907.31 - Disseminating matter harmful to juveniles
- R.C. 2907.32 - Pandering obscenity
- R.C. 2907.321 - Pandering obscenity involving a minor
- R.C. 2907.322 - Pandering sexually oriented matter involving a minor
- R.C. 2907.323 - Illegal use of a minor in nudity-oriented material or performance

### Arson

- R.C. 2909.02 - Aggravated arson
- R.C. 2909.22 - Soliciting or providing support for act of terrorism
- R.C. 2909.23 - Making terroristic threat
- R.C. 2909.24 - Terrorism
- R.C. 2909.03 - Arson

### Robbery and Burglary

- R.C. 2911.01 - Aggravated robbery
- R.C. 2911.02 - Robbery
- R.C. 2911.11 - Aggravated burglary
- R.C. 2911.12 - Burglary

### Theft and Fraud

- R.C. 2913.02 - Theft, aggravated theft
- R.C. 2913.03 - Unauthorized use of a vehicle
- R.C. 2913.04 - Unauthorized use of property, computer, cable, or telecommunication property or service
- R.C. 2923.02 - Attempt
- R.C. 2913.041 - Possession or sale of unauthorized cable television device
- R.C. 2913.33 - Making or using slugs
- R.C. 2913.05 - Telecommunications fraud
- R.C. 2913.06 - Unlawful use of telecommunications

- R.C. 2913.11 - Passing bad checks
- R.C. 2913.21 - Misuse of credit cards
- R.C. 2913.31 - Forgery; identification card
- R.C. 2913.32 - Criminal simulation
- R.C. 2913.40 - Medicaid fraud
- R.C. 2913.41 - Prima facie evidence of purpose to defraud
- R.C. 2913.42 - Tampering with records
- R.C. 2913.43 - Securing writings by deception
- R.C. 2913.44 - Personating an officer
- R.C. 2913.441 - Law Enforcement emblem display
- R.C. 2913.45 - Defrauding creditors
- R.C. 2913.46 - Illegal use of food stamps or WIC program benefits
- R.C. 2913.47 - Insurance fraud
- R.C. 2913.48 - Worker's compensation fraud
- R.C. 2913.49 - Identity fraud

### Offenses against the family

- R.C. 2919.12 - Unlawful abortion
- R.C. 2919.22 - Endangering children
- R.C. 2919.23 - Interference with custody
- R.C. 2919.24 - Contributing to unruliness or delinquency of a child
- R.C. 2919.25 - Domestic violence

### Offenses against justice and public administration

- R.C. 2921.11 - Perjury
- R.C. 2921.13 - Falsification

### Weapons control

- R.C. 2923.12 - Carrying a concealed weapon
- R.C. 2923.13 - Having a weapon while under disability
- R.C. 2923.161 - Improperly discharging a firearm at or into a habitation or school
- R.C. 2923.01 - Conspiracy
- R.C. 2923.02 - Attempt, that relates to a crime specified in division 109.572 (A) (9)
- R.C. 2923.03 - Complicity, that relates to a crime specified in division 109.572 (A) (9)

### Drug offenses

- R.C. 2925.02 - Corrupting another with drugs
- R.C. 2925.03 - Trafficking in drugs
- R.C. 2925.04 - Illegal manufacture of drugs or cultivation of marijuana
- R.C. 2925.05 - Funding of drug or marijuana trafficking
- R.C. 2925.06 - Illegal administration or distribution of anabolic steroids
- R.C. 2925.11 - Possession of drugs or marijuana that is not a minor drug possession offense in section R.C. 2925.01

### Other

- R.C. 959.13 - Cruelty to animals
- R.C. 2905.11 - Extortion
- R.C. 3716.11 - Placing harmful objects in food or confection
- R.C. 2909.04 - Disrupting public services
- R.C. 2909.05 - Vandalism
- R.C. 2917.01 - Inciting to violence
- R.C. 2917.02 - Aggravated riot
- R.C. 2917.03 - Riot
- R.C. 2917.31 - Inducing panic
- R.C. 2921.03 - Intimidation
- R.C. 2921.34 - Escape
- R.C. 2921.35 - Aiding escape or resistance to authority
- R.C. 2927.12 - Ethnic intimidation
- R.C. 4511.19 - Operating vehicle under the influence of alcohol or drugs - OVI. (Two violations within a five year period. This means two violations within a five year period that extends five years before the date of application for hire for employees and before the date of license application for owners/administrator or two violations within any five year period after hire or licensure.)

Or an existing or former offense of any municipal corporation, this state, or any other state,  
or the United States that is substantially equivalent to any of these offenses.

This is a prescribed form which must be used to meet the requirements of rules 5101.2-12-26 and 5101.2-13-26 of the Administrative Code.

Ohio Department of Job and Family Services  
**CHILD CARE EMPLOYEE REFERENCE**  
**FOR CHILD CARE CENTER AND TYPE A HOMES**

<b>To Be Completed by the Employer</b>			
Name of Applicant		Position Applied For	
Employer Signature			
Print Employer Name			
Name of Center			
Street Address			
City	State	Zip Code	Telephone Number
<b>To Be Completed By Person Providing Reference</b>			
<p>Applicants for employment in a child care center or Type A Home must provide their employer with three references which attest to the applicants suitability for employment in a center or Type A Home. These references must be on file before the first day of employment (Rule 5101: 2-12-25 and 5101: 2-13-25 of the OAC). The person applying for the position above has given us your name as a reference on their application for employment with our facility. Please complete and return this form to me at my address above as soon as possible. All information received will be kept confidential. Please note, references must be from persons not related to the employee.</p>			
1. How long have you known the applicant?			
2. What is the nature of your association with the applicant? (friend, employee, neighbor, etc?)			
<b>(Relative references cannot be accepted.)</b>			
3. In your opinion, is this person suitable for work in a child care facility or type A home?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
4. To the best of your knowledge, has the applicant ever been dismissed or asked to resign from a position because of inability to carry out work responsibilities in a child care center?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
5. To the best of your knowledge, has this person ever been convicted of or pleaded guilty to child abuse or any crimes of violence or had a child removed from their home as described in Section 2151.353 of the Ohio Revised Code?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
6. Additional comments			
Print Name			
Street Address			
City	State	Zip Code	Telephone Number
Signature of Person Providing Reference			Date

<b>For References Completed By Telephone</b>	
Who completed the form?	
Signature	Date

This is a sample form provided by ODJFS which may be used by centers and type A homes to meet the requirements of the rules listed above.

JFS 01300 (Rev. 1/2011)

Ohio Department of Job and Family Services  
**CHILD CARE EMPLOYEE REFERENCE**  
**FOR CHILD CARE CENTER AND TYPE A HOMES**

<b>To Be Completed by the Employer</b>			
Name of Applicant		Position Applied For	
Employer Signature			
Print Employer Name			
Name of Center			
Street Address			
City	State	Zip Code	Telephone Number
<b>To Be Completed By Person Providing Reference</b>			
<p>Applicants for employment in a child care center or Type A Home must provide their employer with three references which attest to the applicants suitability for employment in a center or Type A Home. These references must be on file before the first day of employment (Rule 5101: 2-12-25 and 5101: 2-13-25 of the OAC). The person applying for the position above has given us your name as a reference on their application for employment with our facility. Please complete and return this form to me at my address above as soon as possible. All information received will be kept confidential. Please note, references must be from persons not related to the employee.</p>			
1. How long have you known the applicant?			
2. What is the nature of your association with the applicant? (friend, employee, neighbor, etc?)			
<b>(Relative references cannot be accepted.)</b>			
3. In your opinion, is this person suitable for work in a child care facility or type A home?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
4. To the best of your knowledge, has the applicant ever been dismissed or asked to resign from a position because of inability to carry out work responsibilities in a child care center?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
5. To the best of your knowledge, has this person ever been convicted of or pleaded guilty to child abuse or any crimes of violence or had a child removed from their home as described in Section 2151.353 of the Ohio Revised Code?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
6. Additional comments			
Print Name			
Street Address			
City	State	Zip Code	Telephone Number
Signature of Person Providing Reference			Date

<b>For References Completed By Telephone</b>	
Who completed the form?	
Signature	Date

This is a sample form provided by ODJFS which may be used by centers and type A homes to meet the requirements of the rules listed above.

JFS 01300 (Rev. 1/2011)

Ohio Department of Job and Family Services  
**CHILD CARE EMPLOYEE REFERENCE**  
**FOR CHILD CARE CENTER AND TYPE A HOMES**

<b>To Be Completed by the Employer</b>			
Name of Applicant		Position Applied For	
Employer Signature			
Print Employer Name			
Name of Center			
Street Address			
City	State	Zip Code	Telephone Number
<b>To Be Completed By Person Providing Reference</b>			
<p>Applicants for employment in a child care center or Type A Home must provide their employer with three references which attest to the applicants suitability for employment in a center or Type A Home. These references must be on file before the first day of employment (Rule 5101: 2-12-25 and 5101: 2-13-25 of the OAC). The person applying for the position above has given us your name as a reference on their application for employment with our facility. Please complete and return this form to me at my address above as soon as possible. All information received will be kept confidential. Please note, references must be from persons not related to the employee.</p>			
1. How long have you known the applicant?			
2. What is the nature of your association with the applicant? (friend, employee, neighbor, etc?)			
<b>(Relative references cannot be accepted.)</b>			
3. In your opinion, is this person suitable for work in a child care facility or type A home?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
4. To the best of your knowledge, has the applicant ever been dismissed or asked to resign from a position because of inability to carry out work responsibilities in a child care center?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
5. To the best of your knowledge, has this person ever been convicted of or pleaded guilty to child abuse or any crimes of violence or had a child removed from their home as described in Section 2151.353 of the Ohio Revised Code?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
6. Additional comments			
Print Name			
Street Address			
City	State	Zip Code	Telephone Number
Signature of Person Providing Reference			Date

<b>For References Completed By Telephone</b>	
Who completed the form?	
Signature	Date

This is a sample form provided by ODJFS which may be used by centers and type A homes to meet the requirements of the rules listed above.

JFS 01300 (Rev. 1/2011)

Ohio Department of Job and Family Services  
**EMPLOYEE MEDICAL STATEMENT**  
**FOR CHILD CARE CENTERS AND TYPE A HOMES**

The completion of this form is required by Ohio Administrative Code rules 5101:2-12-25 and 5101:2-13-25 that govern the licensing of child care centers and type A homes. The physical examination and completion of this form must occur no more than 12 months prior to the first day of employment.

<b>Name of Employee</b>	
<b>Home Address</b>	
<b>First Day of Employment</b>	

My signature below certifies that I examined the above-named person who is found to be:

1. **Physically fit for employment in a facility caring for children**
2. **Immunized against Diphtheria/Tetanus/Pertussis (Tdap).**  
 (All employees must have verification of being immunized against pertussis by January 2, 2017)
3. **Immunized against Measles, Mumps and Rubella (MMR).**  
 (Except that for a person born on or before December 31, 1956, a history of mumps or measles disease may be substituted for the vaccine. A history of rubella disease shall not be substituted for rubella vaccine. Only a laboratory test demonstrating detectable rubella antibodies shall be accepted in lieu of rubella vaccine.)

Name of Health Care Provider *(Please print)	
Street Address:	
City, State, Zip	Phone Number

Signature of Health Care Provider*	Date of Examination
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\* This form may be signed by a licensed physician, a physician's assistant, advance practice nurse or a certified nurse practitioner.

This is a sample form that meets the requirements of Ohio Administrative Code rules 5101:2-12-25 and 5101:2-13-25 that govern the licensing of child care centers and type A homes.

JFS 01290 (Rev. 9/2011)



1555 Newark Road, Zanesville, Ohio 43701

Child Guidance and Management Policy (5101:2-12-22)

- (D) The following actions and those that are similar or more intrusive may not be used at any time:
- (1) Abuse, endanger or neglect children.
  - (2) Utilize cruel, harsh, unusual, or extreme techniques.
  - (3) Utilize any form of corporal punishment.
  - (4) Delegate children to manage or discipline other children.
  - (5) Use physical restraints on a child.
  - (6) Restrain a child by any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control.
    - (a) Prone restraint of a child is prohibited. Prone restraint is defined as all items or measures used to limit or control the movement or normal functioning of any portion, or all, of a child's body while the child is in a face-down position.
    - (b) Prone restraint includes physical or mechanical restraint.
  - (7) Place children in a locked room or confine children in any enclosed area.
  - (8) Confine children to equipment such as cribs or high chairs.
  - (9) Humiliate, threaten or frighten children.
  - (10) Subject children to profane language or verbal abuse.
  - (11) Make derogatory or sarcastic remarks about children or their families.
  - (12) Punish children for failure to eat or sleep or for toileting accidents.
  - (13) Withhold any food, including snacks and treats, rest or toilet use.
  - (14) Punish an entire group of children due to the unacceptable behavior of one or a few.
  - (15) Isolate and restrict children from all activities for an extended period of time.

I have read and fully understand the Child Guidance and Management Policy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

3/11

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## Associate of Technical Studies - Education (ATED) Course of Study 2015-2016

First Semester I (Fall)				
Course ID	Course Name	T/B/G	Credits	Ck off
EDUC 1010	Introduction to Education	T	3	
EDUC 1450	Introduction to Special Education	T	3	
ENGL 1500	Composition I	G	3	
PSYC 1010	Introduction to Psychology	G	3	
	*First Year Experience Elective	G	1	
	*Mathematics Elective	G	4	
<b>Total:</b>			<b>17</b>	

Second Semester I (Spring)				
Course ID	Course Name	T/B/G	Credits	Ck off
EDUC 1090	Effective Classroom Management	T	3	
EDUC 1110	Observation and Assessment	T	3	
EDUC 1250	Early Childhood Literacy	T	3	
EDUC 1350	Classroom Mathematics	T	3	
	*Arts & Humanities Elective	G	3	
<b>Total:</b>			<b>15</b>	

Summer Session I				
Course ID	Course Name	T/B/G	Credits	Ck off
<b>Total:</b>				

**Curriculum Summary:** General (G)/ Basic (B) = 33 Hours

Technical (T) = 30 Hours

**Total Curriculum Hours =** 63

Third Semester II (Fall)				
Course ID	Course Name	T/B/G	Credits	Ck off
COMM 2610	Public Speaking	G	3	
EDUC 1830	Child Development	B	4	
PSYC 2310	Educational Psychology	G	3	
	*Natural Science Elective	G	3	
	*Technical Elective(s)	T	3	
<b>Total:</b>			<b>16</b>	

Fourth Semester II (Spring)				
Course ID	Course Name	T/B/G	Credits	Ck off
EDUC 2030	Behaviors and Transitions	T	3	
EDUC 2050	Educational Technology	B	3	
EDUC 2110	Family, School & Community	T	3	
EDUC 2720	Professionalism in Education	T	1	
ENGL 2500	Composition II	G	3	
	*Technical Elective(s)	T	2	
<b>Total:</b>			<b>15</b>	

Summer Session II				
Course ID	Course Name	T/B/G	Credits	Ck off
<b>Total:</b>				

**NOTE:** Students must complete the computer literacy requirement in order to graduate which may be met through competency testing or completion of a program specific computer course. Refer to the degree audit and consult with the program advisor for the appropriate course(s) that meet the computer literacy requirement.

**\*ADDITIONAL INFORMATION ON REVERSE**

**Associate of Technical Studies - Education (ATED)**  
**Course of Study 2015-2016**  
**Page 2**

<b>Arts &amp; Humanities Electives</b>		
AMSL 1010	American Sign Language I	3
AMSL 1020	American Sign Language II	3
AMSL 1100	Sign Language for Health Professions	3
ARTS 1010	Art History I	3
ARTS 1020	Art History II	3
ARTS 1200	The History of Photography	3
ENGL 2400	Creative Writing	3
ENGL 2420	The Literature of Work	3
ENGL 2450	The Literature of Crime	3
ENGL 2470	The Literature of Sustainability	3
ENGL 2520	British Literature: Industrialism to Present	3
ENGL 2600	American Literature: Civil War to Present	3
HUMS 1010	Leadership Development Studies	3
HUMS 1020	Critical Thinking	3
PHIL 1010	Introduction to Philosophy	3
PHIL 1020	Introduction to Ethics	3
PHIL 2010	Contemporary Philosophy	3
THTR 1010	Introduction to Theater	3

<b>First Year Experience Electives</b>		
FYEX 1010	First Year Success Strategies	1
FYEX 1020	Linked Freshman Seminar	1

<b>Mathematics Electives</b>		
MATH 1240	Algebra and Trigonometry I	4
MATH 1250	Algebra and Trigonometry II	4
MATH 1340	College Algebra	4

<b>Natural Science Electives</b>		
BIOL 1010	Principles of Biology	3
BIOL 1070	Environmental Science	3
BIOL 1210	General Biology I	4
GEOL 1350	Earth Science	3

<b>Technical Electives</b>		
ECED 2810	Childcare Supervision & Administration	1
ECED 2840	Infant/Toddler Care & Programming	2
ECED 2850	School Age Child Care & Programming	2
EDPA 2030	Behaviors and Transitions	3
EDPA 2210	Reading to Learn	3
EDPA 2450	High and Low Incidence Disabilities	4
EDUC 2250	Phonics	2