



Early Learning Coalition of Duval
**Voluntary Prekindergarten Education Program
Notification of VPK Program Staff Change**

**Submit documents via fax to:
VPK Dept
(904) 208-2049**

Date _____

Facility Name _____

Type of Change _____ Teacher/Assistant

_____ Director

Address _____

_____ Zip _____

Phone _____

Name of Person Reporting Change _____

Title _____

Signature _____

Change of VPK Teacher/Assistant

Class Identifier _____

Class Identifier _____

Name _____

Name _____

SS# Number _____

SS# Number _____

Check one _____ Lead Teacher
_____ Assistant

Check one _____ Lead Teacher
_____ Assistant

Highest Educational Level _____

Highest Educational Level _____

Teacher is replacing _____

Teacher is replacing _____

The following documentation is attached for lead teacher/assistant:

_____ Attestation of Good Moral Character

_____ Background screening clearances
(FBI, FDLE, Local)

_____ Teacher credential

_____ Emergent Literacy /standards training

Change of Director

The following documentation is attached for the new director:

_____ Director Credential

_____ New License (if applicable)