



CANDIDATE DATA FORM

Instructions for completing and submitting this fillable PDF form

1. Candidates are advised to consult the CDF Guidance document found on the CCAP Page of the Partnership website before beginning to complete this form.
2. Click on each section highlighted in blue to enter your information.
3. If there are not enough cells for your entries, use addendum form found on page 26 and/or download from the CCAP page at the Partnership website www.communityactionpartnership.com
4. Save the CDF on your computer for future reference.
5. Attach the completed and saved form with any addendum pages you completed to the CCAP Program administrator at this e-mail address: CCAPContact@aol.com. CDFs are normally due on the 3rd Wednesday of January for consideration toward qualification for the CCAP exam in that year.

Candidate's Name: _____

Address to which mail should be sent: _____

City/State/Zip: _____

Telephone number: _____

Fax number: _____

E-mail address: _____

Organization where you are employed: _____

What Type of Organization is this?

- Community Action Agency (CAA)
- CAA Sub-grantee
- CAA delegate agency
- Other CSBG eligible entity
- State Community Services Program office
- State or Regional CAA association office
- National Community Action related association

DATE THIS FORM IS BEING COMPLETED _____

I. YEARS OF EXPERIENCE AS A MANAGEMENT EXECUTIVE

1. Number of years as a management or executive staff in a CAA:
To qualify, a position must meet at least three of the criteria named in the position checklist under each entry below.

POINTS for this section: 15 points per year to a total maximum of 150 points. No points awarded for partial years

CAA or Association: _____

City, State: _____

Current Position: _____

Dates served (Mo/Yr) From _____ To (enter today's mo/yr here) _____

Check all boxes that describe the responsibilities of this position

- The position includes authority beyond the mere responsibility to carry out others' orders. It is given the discretion to make decisions about how to manage one or more programs
- The position supervises at least one other employee
- The position includes the responsibility to report directly to the organization's board or to a board committee or to the Exec. Director/CEO.
- The position includes the responsibility, and attendant accountability, to administer a budget.
- The position is a member of the executive team

CAA or Association: _____

City, State: _____

Previous Position: _____

Dates served (Mo/Yr) From _____ To _____

Check all boxes that describe the responsibilities of this position

- The position includes authority beyond the mere responsibility to carry out others' orders. It is given the discretion to make decisions about how to manage one or more programs
- The position supervises at least one other employee
- The position includes the responsibility to report directly to the organization's board or to a board committee or to the Exec. Director/CEO.
- The position includes the responsibility, and attendant accountability, to administer a budget.
- The position is a member of the executive team

CAA or Association: _____

City, State: _____

Previous Position: _____

Dates served (Mo/Yr) From _____ To _____

Check all boxes that describe the responsibilities of this position

- The position includes authority beyond the mere responsibility to carry out others' orders. It is given the discretion to make decisions about how to manage one or more programs
- The position supervises at least one other employee
- The position includes the responsibility to report directly to the organization's board or to a board committee or to the Exec. Director/CEO.
- The position includes the responsibility, and attendant accountability, to administer a budget.
- The position is a member of the executive team

CHECK HERE IF YOU HAVE ADDITIONAL "PREVIOUS POSITIONS" THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

2. Number of years as a full-time management or executive staff member in an organization other than a CAA:

POINTS for this section: 8 points per year to a total maximum of 50 points. No points awarded for partial years

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

3. Internship placement in CAA-related organization. (This may include: a CAA, including delegate agency or sub-grantee; CSBG office; state, national, or regional CAA-related association, such as Community Action Partnership, NCAF, NASCSP). Placement must be equal to 1 FTE for duration of internship.

POINTS for this section: 1 point per month to a total maximum of 18 points.

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

Organization _____
Dates served From (Mo/yr) _____ to _____
Position (no checklist required) _____

II. EDUCATION

1. College or Graduate Degree

*POINTS for this section:
Associate = 40 pts; Bachelors = 100 pts
Masters and above = 150 pts;
Maximum allowed = 150 pts*

Degree: _____
Date earned: _____
Univ/College: _____
Major: _____

Degree: _____
Date earned: _____
Univ/College: _____
Major: _____

Degree: _____
Date earned: _____
Univ/College: _____
Major: _____

2. **College credits** earned in **management courses** other than those credits applied to a degree that you have completed. These could be credits for a degree program you did not finish, or for courses completed and credited to you after you graduated.

POINTS for this section: 3 pts per college credit earned to maximum of 30 pts

Dates attended _____ No. of college credits earned _____
Course title: _____
Institution: _____

Dates attended _____ No. of college credits earned _____
Course title: _____
Institution: _____

Dates attended _____ No. of college credits earned _____
Course title: _____
Institution: _____

Dates attended _____ No. of college credits earned _____
Course title: _____
Institution: _____

CHECK HERE IF YOU HAVE ADDITIONAL COURSES THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF

3. **Management courses** completed for which you did not receive college credit. This may include courses for which you received continuing education credits (CEUs).

Courses must meet for a minimum of 12 hours to count in this category. Courses for which you did receive college credit must be entered in #2 above. For courses or other training events that met for less than 12 hours, see #4 through #7 below.)

POINTS for this section: 5 pts per course to a maximum of 30 points. Course must be longer than 12 hours to count in this section

Date: _____ Length in hours _____

Course title: _____

Sponsoring institution; _____

Date: _____ Length in hours _____

Course title: _____

Sponsoring institution; _____

Date: _____ Length in hours _____

Course title: _____

Sponsoring institution; _____

Date: _____ Length in hours _____

Course title: _____

Sponsoring institution; _____

Date: _____ Length in hours _____

Course title: _____

Sponsoring institution; _____

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4A. **Specialized CAA National/State/Regional Executive Training or Certification programs. (30 points)** (This category includes only programs specifically designed to provide comprehensive training in CAA management **or intensive training in specific technical functions in service to Community Action as listed below.** A listing of currently approved programs and the points assigned to each of them is included on the last page of this form.

POINTS for section 4 A through D = cumulative maximum of 90 points

Name of program _____

Is this program on the list of approved programs for this category? YES NO

(See list of approved programs at end of this form)

Sponsoring Organization _____

Length of program (in hours) _____

Date completed _____

Name of program _____

Is this program on the list of approved programs for this category? YES NO
(See list of approved programs at end of this form)

Sponsoring Organization _____

Length of program (in hours) _____

Date completed _____

4B. Completed ROMA Certification Programs. (30 points). This is only for those training programs that **prepare candidate to become either Nationally Certified ROMA Trainers (NCRT) or Nationally Certified ROMA Implementers (NCRI)** (candidates can claim only 1 ROMA certification for points)

I have completed all requirements and have been certified as:

- NCRT (certified trainer)
- NCRI (certified implementer)

4C Completion of Community Action Partnership training as a Pathways Reviewer (10 points)

I have attended a full Pathways Reviewer Training program of at least 20 contact hours.

Location of Pathways Reviewer Training:

Dates of attendance:

4D Completion of the ELITE Program (20 points – ALL boxes must be checked to qualify for points)

- I completed an Individual Development Plan
- I completed written reports for all topic studies
- I participated in at least 85% of the weekly topic discussion sessions

4E Completion of National Family Development Credential. This is only for candidates who completed the 90 hour *Empowerment Skills for Family Worker* course authored by Dr. Claire Forest and led by an official FDC instructor. **YOU MUST CHECK BOTH BOXES TO RECEIVE POINTS (30 points)**

- I have attended the full 90 hour *Empowerment Skills For Family Course* led by an official FDC instructor.
- I have achieved a passing score on a post training examination based on *Empowerment Skills for Family Worker*

5. Management seminars completed that were focused specifically on the **fundamentals of Community Action or Not-for-Profit organizational management.** (A seminar must meet for a period of at least 6 hours to count in this category. Do NOT include in this category any seminars you attended that were presented at state, national, or regional CAA association meetings. See #6 below.)

POINTS for this section: 3 pts per each 6 hours of attendance to a maximum of 30 pts

Topic of seminar: _____

Sponsoring organization: _____

Date of attendance: _____

Length of seminar in hours: _____

Topic of seminar: _____
Sponsoring organization: _____
Date of attendance: _____
Length of seminar in hours: _____

Topic of seminar: _____
Sponsoring organization: _____
Date of attendance: _____
Length of seminar in hours: _____

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Sponsoring organization: _____
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Date of attendance: _____
Length of seminar in hours: _____

Topic of seminar: _____
Sponsoring organization: _____
Date of attendance: _____
Length of seminar in hours: _____

Topic of seminar: _____
Sponsoring organization: _____
Date of attendance: _____
Length of seminar in hours: _____

CHECK HERE IF YOU HAVE ADDITIONAL TRAININGS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

6. Attendance at CAA-related State, Regional, or National Association sponsored seminars/training events. (This category is for participation in seminars that were given under the auspices of a CAA-related association. Each seminar or training event must have met for a minimum of 1 hour (60 minutes) to count in this category. The annual Community Action Partnership Convention or Management and Leadership Training Conference are examples of events that fall into this category. *(Note This is not the category for documenting your attendance at CAA association conferences. See # 8–12 for entries in that category.)*

POINTS for this section: 1 pt. for each hour of attendance per seminar. Seminar must have met for minimum of 60 minutes to receive consideration. No fractions of a point will be given. Maximum for this section = 30 pts

Topic of training/seminar: _____
 Sponsoring CAA related association: _____
 Dates attended: _____
 Length of training/seminar in hours: _____

Topic of training/seminar: _____
 Sponsoring CAA related association: _____
 Dates attended: _____
 Length of training/seminar in hours: _____

Topic of training/seminar: _____
 Sponsoring CAA related association: _____
 Dates attended: _____
 Length of training/seminar in hours: _____

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 Length of training/seminar in hours: _____

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 Length of training/seminar in hours: _____

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Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in hours: _____

Topic of training/seminar: _____
Sponsoring CAA related association: _____
Dates attended: _____
Length of training/seminar in hours: _____

CHECK HERE IF YOU HAVE ADDITIONAL TRAININGS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

7. **Management related seminars/workshops** sponsored by professional or trade associations, business organizations, government agencies, independent commercial seminar producers (half day = at least three hours). This category refers to management training events that are not specifically focused on fundamentals of Community Action or Not-for-Profit organization management already covered in # 5 above. Also, Do NOT include in this category any seminars you attended that were presented by state, national, or regional CAA associations. See #6 above.)

POINTS for this section: 1 pt per half day (i.e. no less than 3 hrs = half day) to a maximum of 20 pts. No partial pts given

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
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Sponsoring organization or company: _____
Dates attended: _____
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Sponsoring organization or company: _____
Dates attended: _____
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Length of seminar/workshop in hours: _____

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Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

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Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

Topic of seminar/workshop: _____
Sponsoring organization or company: _____
Dates attended: _____
Length of seminar/workshop in hours: _____

CHECK HERE IF YOU HAVE ADDITIONAL TRAININGS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

8. Attendance at CAA's State Association Conferences.

(If you attended a seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

State Association Name: _____

Date of Conference meeting (Month and Year) _____

Location: _____

NOTE: There is no need to enter more conferences. 5 conferences provide the maximum number of points available

9. Attendance at CAA's Regional Association Conference.

(If you attended a 1½hour or longer seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

Regional Association Name: _____
Date of Conference meeting (Month and Year) _____
Location: _____

NOTE: There is no need to enter more conferences. 5 conferences provide the maximum number of points available

10. Attendance at the Community Action Partnership's National Conference [formerly NACAA]. (If you attended a 1½ hour or longer seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

Community Action Partnership Conference Location: _____
Date of Conference meeting (Month and Year) _____

NOTE: There is no need to enter more conferences. 5 conferences provide the maximum number of points available

11. Attendance at NCAF's Legislative Conference held in the spring each year in Washington, DC. (If you attended a seminar at this conference and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Years of attendance at annual NCAF Legislative Conference

Date 1 _____

Date 2 _____

Date 3 _____

Date 4 _____

Date 5 _____

NOTE: There is no need to enter more conferences. 5 conferences provides the maximum number of points available

12. Attendance at other CAA-related State, Regional, or National Conferences (CAA related = Head Start, Weatherization, CSBG, etc.). (If you attended a seminar at this meeting and listed it above in #6, you must also have attended other events at the Conference to list your attendance under this category as well. Other events might include such activities as general sessions, legislative briefings, advocacy or networking meetings, planning meetings, open forums, etc.)

POINTS for this section: 2 points per conference to a maximum of 10 pts.

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

Name of Sponsoring Organization: _____
Date of Conference meeting (Month and Year): _____
Location: _____

NOTE: There is no need to enter more conferences. 5 conferences provide the maximum number of points available

III. INVOLVEMENT IN NATIONAL, REGIONAL, STATE AND LOCAL CAA ACTIVITIES.

Instructional presentations to CAA' organizations other than your own. (Minimum of one hour in length.)

POINTS for this section: One point per hour, to a maximum of 5 points per presentation, to a maximum total of 30

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

CHECK HERE IF YOU HAVE ADDITIONAL INSTRUCTIONAL PRESENTATIONS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF

2. Instructional presentations to non-CAA organizations concerning CAA-related matters (Minimum one hour length.)

POINTS for this section: One point per hour, to a maximum of 5 points per presentation, to a maximum total of 20

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

CHECK HERE IF YOU HAVE ADDITIONAL INSTRUCTIONAL PRESENTATIONS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

3. Discussion leader or panelist in an instructional presentation for a CAA organization other than your own

POINTS for this section: 2 points per event, to a maximum of 20 points.

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

CHECK HERE IF YOU HAVE ADDITIONAL INSTRUCTIONAL PRESENTATIONS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

4. Discussion leader or panelist in an instructional presentation for a non CAA organization

*POINTS for this section:
2 points per event, to a
maximum of 10 points.*

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

Sponsoring organization: _____
Subject of presentation: _____
Date: _____ Number of hours: _____

There is no need to add more events. 5 events provide the maximum allowable score

5A. Service in a capacity outside your own CAA (OTHER THAN participation on a Pathways or Excellence Review Team - See 5B and C below. (Use this category if you served on a panel or commission to review the activities of another CAA for the purposes of giving a summary report to the CAA and/or to the agency or organization requiring that review. Other examples would be service on a regional conference planning committee, state Dialogue on Poverty planning groups, Community Action Partnership committees or sub-committees, or ROMA implementation task forces, or similar activities

POINTS for this section: Up to 5 points per activity in section 5A, up to 10 points per review in sections 5B and 5C, to a maximum total of 50 points for all parts of section 5 combined

Name of agency sponsoring the activity: _____
 Type of activity review group planning group implementation group
 other (specify) _____
 Date of delivery of final product or report: _____
 Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
 Type of activity review group planning group implementation group
 other (specify) _____
 Date of delivery of final product or report: _____
 Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
 Type of activity review group planning group implementation group
 other (specify) _____
 Date of delivery of final product or report: _____
 Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
 Type of activity review group planning group implementation group
 other (specify) _____
 Date of delivery of final product or report: _____
 Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
 Type of activity review group planning group implementation group
 other (specify) _____
 Date of delivery of final product or report: _____
 Number of hours you participated in this activity: _____

Name of agency sponsoring the activity: _____
 Type of activity review group planning group implementation group
 other (specify) _____
 Date of delivery of final product or report: _____
 Number of hours you participated in this activity: _____

CHECK HERE IF YOU HAVE ADDITIONAL ACTIVITIES FOR 5A THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

5B Service as Pathways Reviewer for Community Action Partnership (up to 10 points per review - ALL boxes must be checked to qualify for points)

Date of review (Mo and Yr) _____

- I did participate in the Peer Review Consensus Call
- I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

Date of review (Mo and Yr) _____

- I did participate in the Peer Review Consensus Call
- I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

Date of review (Mo and Yr) _____

- I did participate in the Peer Review Consensus Call
- I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

5C Service as Excellence Award Reviewer for Community Action Partnership (up to 10 points per review - ALL boxes must be checked to qualify for points)

Date of review (Mo and Yr)

- I did participate in the Peer Review Consensus Call
- I did participate in site visit
- I submitted completed comments for inclusion in the Feedback Report to the agency reviewed

CHECK HERE IF YOU HAVE ADDITIONAL ACTIVITIES FOR 5B OR 5C THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF

6. Articles published. (This category includes such items as published reports, newsletter articles, letters to the editor, Op/Ed pieces, as well as articles on history, values, programs of CAAs, etc. This category does not include articles written as part of training materials for management or operation of CAAs or related human services organizations. For entries in that category, see Part IV, #1)

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication date: _____

Note that you might be asked to provide a copy of this article/publication

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication date: _____

Note that you might be asked to provide a copy of this article/publication

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication date: _____

Note that you might be asked to provide a copy of this article/publication

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication date: _____

Note that you might be asked to provide a copy of this article/publication

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication date: _____

Note that you might be asked to provide a copy of this article/publication

Publication: _____

Affiliated organization: _____

Title of article: _____

Publication date: _____

Note that you might be asked to provide a copy of this article/publication

*POINTS for this section:
Up to 3 points per article;
1 point for each letter to
the Editor of a newspaper
or other journal; 2 points
for each Op/Ed piece; 3
points for published
reports and articles
published in journals or
magazines, etc.
to maximum of 15 points.*

CHECK HERE IF YOU HAVE ADDITIONAL PUBLICATIONS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF

| | |
|---|--|
| <p>7. Membership on CAA Board of Directors</p> <p>Name of Agency _____ City and State _____ Dates (month/year) served on this board _____ through _____</p> <p>Name of Agency _____ City and State _____ Dates (month/year) served on this board _____ through _____</p> | <p><i>POINTS for this section: 2 points per conference to a maximum of 10 pts. 5 points for each year served. To maximum of 30 points.</i></p> |
| <p>8. Membership on State, Regional, and/or National CAA Association Board of Directors</p> <p>Name of Association _____ Check whether this is a <input type="checkbox"/> National <input type="checkbox"/> State or <input type="checkbox"/> Regional Association Dates (mo/yr) served on this board _____ through _____</p> <p>Name of Association _____ Check whether this is a <input type="checkbox"/> National <input type="checkbox"/> State or <input type="checkbox"/> Regional Association Dates (mo/yr) served on this board _____ through _____</p> | <p><i>POINTS for this section: 5 points for each year served To maximum of 50 points</i></p> |
| <p>9. Membership on other human service organizations Board of Directors (e.g., United Way, Salvation Army, Social Service Agencies)</p> <p>Name of Organization: _____ Dates (mo/yr) served on this board from _____ through _____</p> <p>Name of Organization: _____ Dates (mo/yr) served on this board from _____ through _____</p> <p>Name of Organization: _____ Dates (mo/yr) served on this board from _____ through _____</p> <p>Name of Organization: _____ Dates (mo/yr) served on this board from _____ through _____</p> <p>Name of Organization: _____ Dates (mo/yr) served on this board from _____ through _____</p> | <p><i>POINTS for this section: 2 points per year served, to a maximum of 10 points</i></p> |
| <p>There is no need to add more organizations. 5 provide the maximum allowable score</p> | |

IV. INVOLVEMENT IN PUBLISHING AND TRAINING AND IN ASSOCIATION MANAGEMENT ACTIVITIES OUTSIDE OF THE CAA.

1. Instructional materials (such as articles or books) on the organization, operation, or management of CAAs or related human service organizations. *(You might be asked to provide a copy of article or table of contents of larger work.)*

POINTS for this section: Up to 5 points per document, to a maximum of 30 points.

Type of publication: book, article, manual, a/v materials, Other _____

Title: _____

Publication or production date: _____

Type of publication: book, article, manual, a/v materials, Other _____

Title: _____

Publication or production date: _____

Type of publication: book, article, manual, a/v materials, Other _____

Title: _____

Publication or production date: _____

Type of publication: book, article, manual, a/v materials, Other _____

Title: _____

Publication or production date: _____

CHECK HERE IF YOU HAVE ADDITIONAL PUBLICATIONS THAT YOU ARE ENTERING ONTO A CDF ADDENDUM FORM -- Send that addendum form with this CDF form when you submit your CDF)

2. Instructional presentations on CAA management or related topics for organizations other than CAA associations. (Presentations must be for a minimum of ½ hour to receive points in this category.)

POINTS for this section: 5 points per presentation, to a maximum of 15 points.

Sponsoring organization: _____

Subject of presentation: _____

Location _____ Date: _____

Sponsoring organization: _____

Subject of presentation: _____

Location _____ Date: _____

Sponsoring organization: _____

Subject of presentation: _____

Location _____ Date: _____

There is no need to add more presentations. 3 provide the maximum allowable score

3. Involvement in non-CAA-related association management organizations at the local, state, or national level.

POINTS for this section: 1 point per involvement, to a maximum of 5 points.

Name of association or sponsoring organization: _____
Role or activity in that organization _____
Date of involvement: FROM _____ TO _____

Name of association or sponsoring organization: _____
Role or activity in that organization _____
Date of involvement: FROM _____ TO _____

Name of association or sponsoring organization: _____
Role or activity in that organization _____
Date of involvement: FROM _____ TO _____

Name of association or sponsoring organization: _____
Role or activity in that organization _____
Date of involvement: FROM _____ TO _____

There is no need to add more organizations. 5 provide the maximum allowable score

By typing my name below, I certify that information contained in this form is true and correct.

Name _____ date _____



CDF ADDENDUM PAGE

You can download more addendum forms from the CCAP Page on the Partnership website

This page may be used to submit information to be added to a CDF Use one of these pages for each category on the CDF

NAME _____

DATE: _____

1. MARK the (1) heading and (2) subsection of the category to which this page refers

| | |
|-------------------------------------|--|
| I <input type="checkbox"/> | Years of Experience as a Management Executive under Subsection: <input type="checkbox"/> 1 (yrs of C.A. employment) <input type="checkbox"/> 2 (previous employment) <input type="checkbox"/> 3 (internship) |
| II <input type="checkbox"/> | Education under Subsection: <input type="checkbox"/> 1 (degree) <input type="checkbox"/> 2 (college credits) <input type="checkbox"/> 3 (non credit course) <input type="checkbox"/> 4 (special program) <input type="checkbox"/> 5 (mgmt training) <input type="checkbox"/> 6 (conf training) <input type="checkbox"/> 7 (other training) <input type="checkbox"/> 8 (State convention) <input type="checkbox"/> 9 (regional convention) <input type="checkbox"/> 10 (Partnership convention) <input type="checkbox"/> 11 (NCAF Leg. Conf) <input type="checkbox"/> 12 (other conf) |
| III <input type="checkbox"/> | Involvement in National, Regional, State and Local CAA Activities under Subsection: <input type="checkbox"/> 1 (presenter to CAA) <input type="checkbox"/> 2 (presenter to non CAA) <input type="checkbox"/> 3 (panelist to CAA) <input type="checkbox"/> 4 (panelist to non CAA) <input type="checkbox"/> 5 (consultant role) <input type="checkbox"/> 6 (publications) <input type="checkbox"/> 7 (CAA Board) <input type="checkbox"/> 8 (State Assoc Board) <input type="checkbox"/> 9 (other Board) |
| IV <input type="checkbox"/> | Involvement in Publishing and Training and in Assoc. Mgmt. Activities Outside the CAA. under Subsection: <input type="checkbox"/> 1 (instructional materials) <input type="checkbox"/> 2 (presenter to group not part of CA) <input type="checkbox"/> 3 (other Boards not CA related) |

2. ENTER ALL additional data for each entry under that item number below. Please include all the information required in the subsection of the category you are referencing.

CURRENT TRAINING EVENTS APPROVED BY THE CCAP COMMISSION FOR INCLUSION ON CANDIDATE DATA FORM, Section II.4

(Note: Certain of these programs are no longer in operation. Candidates who have completed any of these prior programs in their entirety, however, are still eligible to earn points in section II.4 for the years when the program was in operation.)

1. “EXECUTIVE DEVELOPMENT INSTITUTE”
Offered through auspices of CSBG Program Office, Missouri Department of Social Services’ Division of Family Services.
2. “SEACAA” CERTIFICATION TRAINING
Offered through auspices of Southeast Association of CAAs
3. COMMUNITY ACTION PARTNERSHIP EXECUTIVE TRAINING SERIES*
Offered in three sections (attendance at all three is required)
 - a. “Essentials of Community Action Management”
 - b. “Mobilizing Resources for Community Action Agencies”
 - c. “The Power of Servant Leadership”
4. “NATIONAL COMMUNITY ACTION MANAGEMENT ACADEMY”
Offered at Mid Iowa Community Action, Marshalltown, IA
5. National ROMA Peer to Peer Training (*And other ROMA peer training programs that meet the qualifications identified on current CDF form*) that lead to certification as either NCRT or NCRI
6. National Community Action Partnership:
 - a. Elite Program
 - b. Pathways Reviewer Training
7. National Family Development Credential (Empowerment Skills for Family Worker

Only those programs that have been pre-approved by the CCAP Certification Commission may be entered on CDF Section II Education, #4, “Specialized CAA National/State/Regional Executive Training or Certification Programs.”