

## KENTUCKY ECELC PARTICIPATION AGREEMENT TAKING STEPS TO HEALTHY SUCCESS

Jefferson County Public Schools agree to participate to the best of our ability in the National  
(name of program or center)

Early Care & Education Learning Collaborative being offered by the Kentucky Department of Public Health with funding from Nemours and the Center for Disease Control and Prevention. I understand that participation involves the following:

- One year commitment to work on improved practices related to childhood obesity prevention.
- Attendance by 1-3 members of my staff, including myself, at 5 full-day, in-person learning sessions.
- Completion of several evaluation tools including, but not limited to, the *Let's Move!* Child Care Quiz and Go NAPP SAC.
- Completion of homework and training between learning sessions to include a pilot action plan, story board, and year-long action plan.
- Participation in technical assistance and coaching from the ECE Trainers of Nemours.

I understand that in return my program/center will receive materials; training and technical assistance in addition to a \$500.00 incentive of which \$200.00 will be received after learning session 2 and \$200.00 will be received after learning session 5 and \$100 will be received 6 months after the conclusion of the project. If we can no longer participate, we will proactively notify our State Project Coordinator, Rebekah Duchette at (502) 330-2762 or Rebekah.duchette@ky.gov.

\_\_\_\_\_  
Donna M. Hargens, Ed.D  
Superintendent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## PHOTOGRAPHIC CONSENT

Jefferson County Public Schools agree to allow photos of our staff participating in the National  
(Name of program or center)

Early Care & Education Learning Collaborative to be used for publicity and public information by Nemours. If members of my staff are unwilling to be photographed for this purpose, I agree to inform them of their right to remove themselves from an activity when/if photographs are taken. This term of use of these photographs is for five years from the date of this consent.

\_\_\_\_\_  
Donna M. Hargens, Ed.D  
Superintendent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date