



Program Planning Guide
EARLY CHILDHOOD ADMINISTRATION (CERTIFICATE) (C55850) (ONLINE)

Student Name: _____ **ID #:** _____ **Date of Enrollment:** _____

Advisor Name: _____ **Contact Information:** _____

A Criminal Background check may be required as a condition of employment in the early childhood education field.

Students must meet eligibility to take college-level coursework through placement tests or other measures. Please see the Student Handbook for further information.

Early Childhood Administration Certificate (C55850) Course Requirements 16 credit hours:

Courses	Cr.	Recommended Semester	Semester Registered/ Planned	Semester Completed/ Grade
EDU 119 Introduction to Early Childhood Education*	4			
EDU 131 Child, Family and Community*	3			
EDU 153 Health, Safety and Nutrition*	3			
EDU 261 Early Childhood Administration I*	3			
EDU 262 Early Childhood Administration II*	3			

NOTES: *All courses must be completed with a grade of "C" or better.
 **See course catalog for prerequisite and/or corequisite requirements.

EDU 114 and EDU 119 have components of the course using the North Carolina Foundations for Early Learning and Development, which is a free resource.

The courses listed on this program guide are the courses currently offered online through Richmond Community College. Please speak to your advisor if you have taken courses at another college or university. Please see the Student Handbook for the courses, which are part of the North Carolina Articulation Agreement. The North Carolina Comprehensive Articulation Agreement is a statewide agreement governing transfer credits from North Carolina community colleges to North Carolina public universities and participating private universities. RichmondCC cannot guarantee the transfer of courses to out-of-state universities

Students please read the following and sign below.

I understand that as an RCC student, I am ultimately responsible for my schedule. I understand that I must complete each course with a grade of "C" or better and follow the established course sequence or my ability to graduate on time may be affected.

My advisor has information regarding other colleges and transfer opportunities that I can investigate after completing my degree/diploma/certificate, and I understand that if I would like more information I can schedule an appointment with him/her.

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____ Advisor Signature: _____ Date: _____

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____ Advisor Signature: _____ Date: _____

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____ Advisor Signature: _____ Date: _____

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____ Advisor Signature: _____ Date: _____