

# CYC Entry Level SUPERVISOR REFERENCE

Version 3.0

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The individual listed on this form has applied for certification as an Entry Level Child and Youth Care Practitioner (CYC).

Certified practitioners meet the highest standards in the field as established by the professional community at the entry level.

Through the professional certification process, candidates document their experience and competence in specific domains including:

- Professionalism
- Cultural and human diversity
- Applied human development
- Relationship and communication
- Developmental practice methods

The complete *Competencies for Professional Child and Youth Care Work Practitioners* may be downloaded at [www.CYCCB.org](http://www.CYCCB.org).

One Supervisor Reference from a current or former supervisor is submitted with each Entry Level application.

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CHILD & YOUTH CARE  
CERTIFICATION BOARD

## Instruction to candidate:

Complete Section One and give this form to the individual who is providing your reference along with a stamped envelope addressed to:

CYCCB Office  
1212 Orr St  
College Station TX 77840-4454  
(979) 764-7306 [CYCcertification@youthworkacademy.org](mailto:CYCcertification@youthworkacademy.org)

## Instruction to individual providing reference:

Please complete Section Two and mail completed form directly to the CYCCB Office in the envelope provided.

## SECTION 1: CANDIDATE INFORMATION AND AGREEMENT

**This section is to be completed by the candidate.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Organization name

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

I am requesting my supervisor provide this reference. I understand that the information provided on this form will be used in determining my eligibility for certification as an Entry Level Practitioner (CYC) by CYCCB and that it will be maintained as confidential.

I waive my right to review the contents of the reference and understand that it will be submitted directly to the CYCCB Office.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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## Entry Level Scope of Practice

Entry level Child and Youth Care Practitioners:

- Have a minimum of one (1) year experience working with children, youth & families
- Promote the optimal development of children, youth, and families
- Are engaged in basic training in child care and youth work
- Are focused on learning fundamental practice skills
- Work under the supervision of others with more advanced credentials

## SECTION 2: CONTACT INFORMATION AND REFERENCE

This section is to be completed by the individual providing the reference.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Organization name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City

\_\_\_\_\_  
State/Province

\_\_\_\_\_  
Zip/Postal code

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

I have been personally acquainted with \_\_\_\_\_  
(name of applicant)  
since \_\_\_\_\_.  
(month/year).

The nature of my relationship to the applicant is:

- Current supervisor
- Former supervisor
- University or college professor overseeing field placement/internship
- Other \_\_\_\_\_

I understand that my recommendation should be provided only for applicants who are described by the scope of practice outlined in the colored panel at the left, who are respected by their peers, and have demonstrated professional character, ethics, and behavior on a consistent basis.

I have no reason to believe that the applicant has been convicted of any crime(s) that would cause him/her to be denied employment working with children, youth or families.

I recommend the applicant for certification as an Entry Level CYC Practitioner (CYC). Any additional comments are stated below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I do not recommend the applicant for certification at this time. Any reservations I have are stated below.

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date