



Alternate Process – Candidate Assessment Profile

Candidate's Name _____

Address _____ **Date** _____

**IYD Credential Candidate Assessment Profile
Alternate Process**

Independent Reviewer: For each Competency Area record: 1) Statement on the Candidate's achievement; and 2) Strategy(ies) for professional development. As you conclude the two to four Competency Areas in each General Area, record your findings in the appropriate area. Additional comments or recommendations can be continued on the back of the page.

CHILD/YOUTH DEVELOPMENT			
Competency Area 1 Knowledge of Child/Youth Development	Overview of Candidate's Performance	Strategy(ies) for Professional Development	CHILD/YOUTH DEVELOPMENT (#1) Independent Reviewer finds that the candidate has: _____ Successfully achieved competency _____ Needs Training (please specify)
Competency Area 2 Observation/ Assessment Methods	Overview of Candidate's Performance	Strategy(ies) for Professional Development	
Competency Area 3 Individual Differences	Overview of Candidate's Performance	Strategy(ies) for Professional Development	
Competency Area 4 Guidance Skills	Overview of Candidate's Performance	Strategy(ies) for Professional Development	



FAMILIES & COMMUNITIES			
Competency Area 5 Respect for Diverse Cultures in Community	Overview of Candidate's Performance	Strategy(ies) for Professional Development	FAMILIES & COMMUNITIES (#2) Independent Reviewer finds that the candidate has: ____ Successfully achieved competency
Competency Area 6 Works with Families	Overview of Candidate's Performance	Strategy(ies) for Professional Development	____ Needs Training (please specify)
Program Environments			
Competency Area 7 Assures a Healthy & Safe Environment	Overview of Candidate's Performance	Strategy(ies) for Professional Development	PROGRAM ENVIRONMENTS (#3) Independent Reviewer finds that the candidate has: ____ Successfully achieved competency
Competency Area 8 Uses Indoor/ Outdoor Environments	Overview of Candidate's Performance	Strategy(ies) for Professional Development	____ Needs Training (please specify)



PROGRAM CONTENT/ CURRICULUM			
Competency Area 9 Planning for Inter-personal and Intra-personal Development	Overview of Candidate's Performance	Strategy(ies) for Professional Development	PROGRAM CONTENT/ CURRICULUM (#4) Independent Reviewer finds that the candidate has: _____ Successfully achieved competency _____ Needs Training (please specify)
Competency Area 10 Planning for Cognitive & Language/Literacy Learning	Overview of Candidate's Performance	Strategy(ies) for Professional Development	
Competency Area 11 Planning for Physical Learning	Overview of Candidate's Performance	Strategy(ies) for Professional Development	
Competency Area 12 Planning for Creative Learning	Overview of Candidate's Performance	Strategy(ies) for Professional Development	



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PROFESSIONALISM			
Competency Area 13 Self-Development	Overview of Candidate's Performance	Strategy(ies) for Professional Development	PROFESSIONALISM (#5) Independent Reviewer finds that the candidate has: _____ Successfully achieved competency _____ Needs Training (please specify)
Competency Area 14 Appreciates Children/ Youth	Overview of Candidate's Performance	Strategy(ies) for Professional Development	
Competency Area 15 Ethical and Responsible Employee	Overview of Candidate's Performance	Strategy(ies) for Professional Development	
Competency Area 16 Professional Development	Overview of Candidate's Performance	Strategy(ies) for Professional Development	



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Independent Reviewer Final Evaluation

Having reviewed both the Competency Standards and the Independent Reviewer's conclusions for each Competency Area, and having given the Candidate an opportunity to participate in this final decision process, I do here record the results of my Assessment of this Candidate at this time.

The Candidate _____

_____ Has achieved competency standards and **IS RECOMMENDED TO BE AWARDED** the Indiana Youth Development Credential.

_____ Needs more training, as indicated above, and **IS NOT RECOMMENDED FOR RECEIVING** the Indiana Youth Development Credential at this time. (**Make sure that any competency where "Needs more training" is marked contains information on the specific needs.**)

_____ Candidate has been provided information on the appeals process.

Date _____ **Signed:**

Candidate _____

Independent Reviewer _____

NOTE: At the conclusion of the Assessment Team Meeting, **a copy of this document is made and included in the packet that is submitted to the YouthPRO Office for final evaluation.** The original is given to the Candidate and filed for use in planning for future professional development activities. This document will be a key component of the renewal process.