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## Step Up to T.E.A.C.H. and Step Up to WAGE\$ Demonstration Programs Intent to Apply

Please check one:

This form serves as an intent to apply for *Step Up to T.E.A.C.H.* \_\_\_\_\_

This form serves as an intent to apply for *Step up to WAGE\$* \_\_\_\_\_

\_\_\_\_\_ (FULL NAME/ORGANIZATION NAME) is the name of the potential applicant for \_\_\_\_\_ (STATE).

\_\_\_\_\_ (FULL NAME, TITLE) will be the contact person for coordination of the application for the administrative home on behalf of the organization.

I understand that submitting this form in no way guarantees the state or organization will participate in the *Step Up to T.E.A.C.H./WAGE\$* demonstration program.

Submitted by:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date: \_\_\_\_\_

Please submit this form to Marsha Basloe at [mbasloe@childcareservices.org](mailto:mbasloe@childcareservices.org).