



FY 2010 PREVENTION INITIATIVE AGES BIRTH-3 CALL FOR REVIEWERS

If you are interested in being a proposal reader for our ECBG Prevention Initiative Birth – 3 Program, please consider the following and submit the attached application.

- Reviewers should be available to read between May 26 – June 8, 2009 exact dates and length of commitment will depend on the number of proposals and number of readers.
- Each reader will have approximately 10 proposals to review.
- Each reader reviews his/her proposals individually but may consult with other readers on his/her review team as needed. The team does not have to meet.
- Proposals, review rubrics and instructions will be mailed to reviewers.
- A reader orientation conference call will be scheduled – participation is required.
- A toll free number and passcode for the conference call will be e-mailed to each reviewer.
- Anyone responding to this request will be notified by e-mail whether or not their services are needed for this activity.
- Those not selected to review this RFP will be considered for future proposal review opportunities.
- Readers will be selected based on their individual qualifications and number of proposals received.

To Apply

- If you applied to be a reader last year, send an e-mail to earlychi@isbe.net by Monday, April 20, 2009 stating that you are interested in being a reader this year and have previously sent in a resume. You will need to send in a new application form as it has been revised. Include the address where you would like your materials sent and any geographic areas that may present a conflict of interest.
- If you have never applied to be a reader, please complete the attached application and send it along with your resume by Monday, April 20, 2009. The application and resume can either be faxed to 217/785-7849 or e-mailed to earlychi@isbe.net: If you wish to mail them send the forms to the following address:

Illinois State Board of Education
Early Childhood Division
Attn: 0-3 Reviewer
100 North First Street, E-225
Springfield, IL 62777-0001

In submitting this application you are volunteering your time and expertise to complete the review of approximately 10 proposals.

If you have questions or need more information, please contact Alicia Lynch-Deatherage at 217/524-4835. Thank you for your time and expertise!

ILLINOIS STATE BOARD OF EDUCATION

Early Childhood Division
100 North First Street, E-225
Springfield, IL 62777-0001

**FY 2010 PREVENTION INITIATIVE AGES BIRTH-3
PROPOSAL REVIEW APPLICATION**

Please indicate where you would like to have materials sent: Program Home

APPLICANT NAME

HOME ADDRESS (Street, City, State, Zip Code)

TELEPHONE (Include Area Code)

FAX (Include Area Code)

E-MAIL

COUNTY

PROGRAM/EMPLOYER NAME

PROGRAM ADDRESS (Street, City, State, Zip Code)

TELEPHONE (Include Area Code)

FAX (Include Area Code)

E-MAIL

Yes **No**

1. Have you ever been hired as a grant writer for an Early Childhood Block Grant program? If yes, indicate following:

Name of District/Agency _____ Year _____

2. Have you or your district/agency applied for a Birth to Three grant? If yes, indicate year Year _____

Describe your knowledge of ISBE's Early Childhood Block Grant programs.

Describe your knowledge and expertise in any of the Research Based Models.

Describe your background, knowledge and expertise in infant toddler development.

In 75 words or less, describe a quality Birth to Three program.

Please list your educational achievements and area of study:

Associate degree: _____ Masters degree: _____

Baccalaureate degree: _____ Advanced degree: _____

Early Childhood Education experience: _____ years

Comments:

Please indicate any anticipated proposal(s) that would present a conflict of interest for you as a reviewer. (*Example: Conflict of Interest.*) If you, or any related person, have an affiliation or financial connection with an organization or person submitting a proposal that might be construed as creating a conflict of interest, please list and describe those affiliations/interests below.)