

# **MICHIGAN ASSOCIATION OF SENIOR CENTERS**

Working to make Michigan's Senior Centers even better!

## **SENIOR CENTER DIRECTOR CERTIFICATION**

### **Introduction**

Across the state there is a great divergence in the educational level and experience of Senior Center Directors. Some directors have high school diplomas, others have advanced degrees. No one academic path exists for Senior Center Directors and most center directors are trained on the job. Center directors themselves realize the complexity of their jobs and know that skills must range from personnel and facility management to fund development and recreational programming. Center directors must be adept at fiscal management, program planning and implementation, and volunteer management. Center directors often work long hours – often for salaries which are not in line with the level of responsibility which the job requires.

The intent of certification is to provide a state-wide standard that can be used as a measure of professionalism by interested agencies and individuals. It is further intended that certification will encourage the continuing professional growth and development of Certified Senior Center Directors.

### **Purpose**

- \*\* Promotes professional credibility and visibility
- \*\* Identifies to the public and professional peers those center directors who have met specific professional standards.
- \*\* Encourages the continuing professional growth and development of Michigan Association of Senior Centers certified senior center directors.

**SENIOR CENTER DIRECTOR CERTIFIED  
APPLICATION FORM**

The following will be kept in confidential files by the Michigan Association of Senior Centers and shall be available for the Certification Board.

NAME \_\_\_\_\_ DATE \_\_\_\_\_  
                    Last                      First                      Middle

NAME AS YOU WISH TO IT APPEAR ON CERTIFICATE \_\_\_\_\_

AGENCY / ORGANIZATION NAME \_\_\_\_\_

AGENCY / ORGANIZATION ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PHONE \_\_\_\_\_

POSITION / TITLE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PHONE \_\_\_\_\_

**DISCLAIMER**

I understand that the application fee is non-refundable in the event that my application is not approved. I also understand that it is my responsibility to keep my certification current and submit a valid renewal application every three years. Applications are accepted January 1 through June 30.

\_\_\_\_\_  
Applicant's Signature                      Date

## DEFINITION OF A SENIOR CENTER DIRECTOR

The Director (or comparative title) is responsible for overseeing the daily operation of the Senior Center. He/She handles the budget, record keeping, personnel, service coordination, and management of the facility. Applicants must be working as a Senior Center Director in the year that the application is completed.

- A. Degree (minimum Associates)  
3 years experience as a Senior Center Director  
Body of Knowledge
  
- B. 7 years experience as a Senior Center Director  
Body of Knowledge  
1.0 C.E.U.'s or 9.0 classroom credit hours, earned within the last 4 years, in job-related field or the field of aging.

Certification renewal is required every 3 years. The applicant for SCAC renewal must be able to document 16 hours on MASC Board , or 1.0 CEU's, in workshops/seminars, or 3 classroom credit hours from an institution of higher education, **per year**, in job-related fields or in the field of aging. For workshop/seminars which are not sponsored by M.A.S.C. standardized documentation forms are available. Registration must be validated and **all documentation forms MUST be signed by the presenter.** Attending the Annual MASC Conference will assist in helping accumulate the required CEU's needed for certification renewal. Sitting on the MASC Board, with active participation at scheduled meetings and at the Annual MASC Conference, will meet the renewal requirements.

## GENERAL INFORMATION

In order to qualify as a Senior Center Director, the center that you operate must meet certain criteria. In addition, you must provide documentation. (see attached criteria) Successful applicants will receive the title: Senior Center Certified (C.D.C.)

Cost of Certification:	\$50.00 member	\$100.00 non-member
Certification Renewal:	\$25.00 member	\$50.00 non-member

Renewal required every 3 years.

## **SENIOR CENTER CRITERIA**

1. Ability of the site to meet the service needs of older persons including direct access to existing information, referral, and emergency services;
2. Concentration of older persons living in the vicinity of the center;
3. Ability to serve low-income, minority, frail, handicapped seniors living in the vicinity of the center;
4. Potential of the site to accommodate additional services. The agency or the department that oversees the site should undertake actions to bring services and programs to the site. Services such as legal assistance, Social Security, DSS, health screening, etc., should be encouraged to bring their programs to the site on a regularly scheduled basis;
5. Capability of being open at least 20 hours per week;
6. Site should be barrier free (i.e. accessible to the handicapped);
7. Accessibility of site to seniors (including access of site to public or private transportation);
8. Site must provide at least six (6) of the following services on-site and/or be capable of assisting seniors in accessing all other services.

Adult Daycare	Housing Information
Chore Service	Informational & Referral
Congregate Nutrition	Legal Assistance
Counseling	Personal Care
Crisis Intervention	Recreation
Educational Classes	Respite Care
Emergency Services	Substance Abuse
Energy Assistance	Tax Filling Assistance
Health Screening	Telephone Reassurance
Hearing Impaired Services	Transportation
Home Delivered Meals	Vision Impaired Services
Home Repair	Volunteer Opportunities
Homemaker	

Documentation for each of the above criteria (1-8) may include: newsletter copy, program brochures, flyer, affidavits, letters of support, etc.

## EMPLOYMENT HISTORY

**Agency / Organization** \_\_\_\_\_

Title \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Date of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Circle Appropriate Category

Full Time	Number of hours per week	_____
Part Time	Number of hours per week	_____

- B. Attach letter of support from Employer or Immediate Supervisor.

## **BODY OF KNOWLEDGE**

Address each heading in the Body of Knowledge, examples under each heading are provided and may include but are not limited to those listed. Verification/documentation must be included and may be in the form of pictures, news articles, brochures, fliers, newsletters, photographs, copies of plaques, letters of support from sponsors, etc. **Address each section as indicated and include all supporting data and documents in the order that they should appear. All narratives, supporting materials and documentation must be typed and organized in an indexed notebook form.**

### **I-PROGRAMMING**

Address one example in each of the following five categories. This must be a program which you have personally created, implemented, and/or supervised **within the last three years**. The discussion/documentation must include all of the following:

- (1) the creation of planning process; (2) implementation; (3) fiscal management;
  - (4) use of staff and/or volunteers; (5) publicity/public relations; (6) and evaluation.
- A. Recreation (travel, parties, special events, etc.)
  - B. Education (lecture series, classes, special speakers)
  - C. Health Promotion/Wellness (Health Fairs, fitness programs)
  - D. Social Services (entitlement programs, case work, MEPPS, legal services)
  - E. Fund-raising (special events or functions specifically designed to raise funds)

### **PERSONNEL AND/OR VOLUNTEER MANAGEMENT**

Address and document all areas listed below. If you have both paid staff and volunteers, address both categories.

#### **PAID STAFF**

- A. Job Descriptions
- B. Training
- C. Staff Meetings
- D. Organizational Chart
- F. Evaluations

#### **VOLUNTEERS**

- A. Job Descriptions
- B. Training
- C. Recognition
- D. Organizational Chart

### III-FISCAL MANAGEMENT

Address and document the areas listed below. Please note that the grant writing portion is optional and should be addressed if you actively seek grant funds.

- A. Budget Writing ( copy of most current budget)
- B. Record Keeping/Monthly Accounting (monthly and/or annual reports)
- C. Date and name of firm for most recent Audit Report ( do not include actual report)
- D. Grant Proposals ( include successful and unsuccessful-introductory pages only)

### IV – PROFESSIONALISM/ADVOCACY

Address and document all areas listed. Discussion for parts D, E, and F should contain all pertinent details as to thoroughly describe the scope of your involvement.

- A. Your Resume
- B. Your Job Description
- C. Professional Associations and Board or Commissions Affiliations
- D. Community/Public Relations (i.e. –cooperative ventures, partnerships, service clubs, cable TV, religious community)
- E. Advocacy (i.e. –working with elected officials and/or advocacy groups)
- F. Published professional articles, newsletters and/or professional presentations

\* \* \* \* \*

Applicants will be notified in writing as to the status of their application proper to the Certification Presentation at the Michigan Association of Senior Centers Fall Conference. If deficiencies are discovered during the certification process, Applicants will be notified and allowed **one** opportunity to make corrections or additions.

Applications will be accepted from January 1 – June 30 for certificates that will be awarded at the MASC Fall Conference.

Fees:	Certification:	\$50.00 members / \$100.00 non-members
	Renewal:	\$25.00 members / \$50.00 non-members

**Pay by check or money order only -- Make checks payable to: M.A.S.C.**

*Mail entire application to:*  
Rina Chemin, CPRP, SDC, Standard Committee  
Michigan Association of Senior Centers  
c/o Saline Area Senior Center  
7190 N. Maple  
Saline, MI 48176

# SENIOR CENTER DIRECTOR CERTIFICATION BOOK FORMAT OUTLINE

*Please Organize your Certification Book in the order of this Outline. \**

Application Form

Copy of Degree

## Senior Center Criteria

1. Documentation for item numbers 1-8. May include newsletter copy, program brochures, flyers, affidavits, letters of support, etc.
2. Site Services (No. 8)  
Must provide proof of AT LEAST SIX on-site services.

Employment History Form

Letter of Support

Body of knowledge

- I. Programming
  - A. Recreation
  - B. Education
  - C. Health Promotion/Wellness
  - D. Social Service
  - E. Fund raising

Please include for each of the above categories

- (1) The creation/planning process
- (2) Implementation
- (3) Fiscal Management
- (4) Use of staff/volunteers
- (5) Publicity/public relations
- (6) Evaluation



## Personnel and/or Volunteer Management

- A. Paid Staff
  - (1) Job Descriptions
  - (2) Training
  - (3) Staff Meetings
  - (4) Organizational Chart
  - (5) Evaluations
  
- B. Volunteers
  - (1) Job Descriptions
  - (2) Training
  - (3) Recognition
  - (4) Organizational Chart

## Fiscal Management

- A. Copy of most current budget
- B. Record Keeping
- C. Copy of most recent Audi Report
- D. Grant proposals

## Professional/Advocacy

- A. Copy of your resume
- B. Copy of your job description
- C. Professional Affiliations
- D. Advocacy
- E. Published professional articles and/or professional presentations
- F. Copy of Newsletter

Please Note: All information in your certification book must be typed. Also, some pieces of documentation must be included more than once.