



## **CERTIFICATION AS A WELFARE DIRECTOR/GA ADMINISTRATOR**

### **CERTIFICATION GUIDELINES**

#### **I. Introduction**

The purpose for Welfare Directors/General Assistance Administrators/Deputies and Assistants to receive this certification is as follows:

- A. to establish and promote equitable, efficient and standardized administration of General Assistance, and
- B. to encourage the professional development of Welfare Directors/GA Administrators/Deputies and Assistants, and
- C. to provide and exchange information which will improve the administration of General Assistance.

#### **II. Philosophy**

The General Assistance Program is grounded in the philosophy that a fundamental role of government is to provide a safety net to protect the health and well-being of all citizens in our community. The General Assistance Program is administered according to standards and rules established by state regulations, laws and municipal ordinance.

- A. The first goal of the Certified Welfare Director/General Assistance Administrator is to abide by all federal, state and local laws and those rules and regulations governing the program.
- B. The second goal of the Certified Welfare Director/General Assistance Administrator is to establish and maintain the highest levels of professionalism and an environment conducive to the well-being of both clients of General Assistance and staff involved in its administration.
- C. The third goal of the Certified Welfare Director/General Assistance Administrator is to operate a program that delivers assistance efficiently, fairly, uniformly, in good faith, without discrimination and with maximum possible accountability to both municipal supervisory personnel and the taxpaying public.
- D. The fourth and ultimate goal of the Certified Welfare Director/General Assistance Administrator is to encourage and assist applicants in becoming self-reliant.

### III. Certification Procedure

#### A. **Who should apply?**

An individual who is a current member of MWDA in good standing, and currently administers the General Assistance program. The individual shall have held that position for three (3) years of the five (5) year period that precedes the application date.

#### B. **What criteria will be used as the basis for certification?**

To become certified the applicant must submit an application form with:

1. A copy of your MWDA membership card or other proof of current membership.
2. Supporting documentation showing that all requirements have been successfully completed. Certificates must be attached and in the order in which they appear on the application. The MMA sign in sheet is not proof that the training was attended in its entirety and will not be accepted for certification purposes.

#### C. **How will the certification process work?**

Members of the Executive Committee/Professional Development Committee will review all submitted material and approve or deny the application. If the application is approved, the certificate and a letter of recognition will be sent to the recipient, and to the recipient's city/town. All of those receiving certificates will be recognized at the Spring Seminar. If something is missing from your application, you will be notified.

- **CERTIFICATION IS VALID FOR FIVE (5) YEARS FROM THE APPROVAL DATE.**

Please send copies, we cannot be responsible for the loss of original documents.

***Return to: [Training@memun.org](mailto:Training@memun.org) or mail to:  
MWDA, 60 Community Drive, Augusta, ME 04330***

**MAINE WELFARE DIRECTORS ASSOCIATION**  
**CERTIFICATION AS A WELFARE DIRECTOR/GA ADMINISTRATOR**  
**CERTIFICATION GUIDELINES**

**APPLICANT MUST COMPLETE ALL MANDATORY REQUIREMENTS AND THREE (3) OF THE OPTIONAL REQUIREMENTS. EACH TRAINING MUST BE ATTENDED IN ITS ENTIRETY IN ORDER TO BECOME CERTIFIED.**

**A. MANDATORY REQUIREMENTS**

1. MUNICIPAL GENERAL ASSISTANCE LAW: Applicant must be currently certified in the Fundamentals of General Assistance Administration.
2. WELFARE DIRECTOR/GENERAL ASSISTANCE ADMINISTRATOR SERVICE: Applicant must currently serve as a welfare director or general assistance administrator and must have served in that capacity for a period of three (3) years, in the preceding five (5) year period.
3. DEPARTMENT OF HEALTH AND HUMAN SERVICES AUDIT: The municipality must be in compliance with the most recent DHHS audit.

**THIS APPLICATION MUST BE ACCOMPANIED BY PROOF OF COMPLETION OF MANDATORY AND OPTIONAL REQUIREMENTS. CERTIFICATES MUST BE ATTACHED AND IN THE ORDER IN WHICH THEY APPEAR ON THE APPLICATION.**

Please send copies, we cannot be responsible for the loss of original documents.

MAINE WELFARE DIRECTORS ASSOCIATION

## Certification as a Welfare Director/GA Administrator Application

**APPLICANT MUST CURRENTLY SERVE AS THE MUNICIPALITY'S WELFARE DIRECTOR/G.A. ADMINISTRATOR, AND HAVE HELD THAT POSITION FOR THREE (3) YEARS OF THE FIVE (5) YEAR PERIOD THAT PRECEDES THE APPLICATION DATE; BE CERTIFIED IN ADVANCED GENERAL ASSISTANCE; AND MUST BE A MEMBER OF MWDA IN GOOD STANDING.**

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

Municipality: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Length of Service in GA Position: \_\_\_\_\_

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

**CERTIFICATION IS VALID FOR FIVE (5) YEARS FROM THE APPROVAL DATE.  
APPLICANT IS RESPONSIBLE TO PROVIDE DOCUMENTATION THAT ALL  
REQUIREMENTS HAVE BEEN SUCCESSFULLY COMPLETED.**

### **A. MANDATORY REQUIREMENTS**

**THE TRAINING IS TO BE CONDUCTED BY THE MAINE WELFARE DIRECTORS ASSOCIATION.**

Date:

1. Applicant must have completed General Assistance Advanced Training once in the three (3) year period that immediately precedes the application date. Please note that General Assistance Basic Training is a prerequisite for the General Assistance Advanced Training. \_\_\_\_\_
2. Applicant must currently serve as a Welfare Director/General Assistance Administrator/Deputy or Assistant, and must have served in that capacity for a period of three (3) years, in the preceding five (5) year period; and must be a member in good standing in the Maine Welfare Directors Association. \_\_\_\_\_
3. The municipality must be in compliance with the most recent DHHS Audit. \_\_\_\_\_

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**B. OPTIONAL REQUIREMENTS**

**Applicant must meet at least three (3) of the following eight (8) requirements once in the five (5) year period that precedes this application date):**

Date:

1. Serve on the MWDA Executive Board or an MWDA Committee and meet attendance requirements.

\_\_\_\_\_

2. Serve on a committee/board/task force/advisory board related to social services, its administration, client populations and any social/political/legal issue that impacts the aforementioned.

\_\_\_\_\_

**Note:** Serving on an MWDA Committee or the MWDA Executive Board does not meet optional Requirement #2.

3. Public service presentation given in your community which is related to social services.

\_\_\_\_\_

4. Completion of an educational course related to social services.

\_\_\_\_\_

5. Teach or assist with an MWDA Sponsored Training and/or Workshop.

\_\_\_\_\_

6. Attend the Spring Seminar (one day).

\_\_\_\_\_

7. Attend a Membership Training.

\_\_\_\_\_

8. Attend the MMA Convention.

\_\_\_\_\_

Signature: \_\_\_\_\_

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

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