

(For CDA Renewals Only)

Renewal Waiver Request Form

CDA Renewal Candidate: Please complete this form if you fail to meet one or more of the Renewal Requirements as outlined in the CDA Renewal Procedures book. *NOTE: Please only use this form if you are applying on paper. Candidates applying online will fill out waiver forms as part of their online process.*

Early Childhood Education Reviewer: You may use this form if you fail to meet any of the eligibility criteria to serve as a Reviewer for a CDA Renewal Candidate, as outlined in the *Information for the Early Childhood Education Reviewer* book.

Name of Person Requesting Waiver : _____

Last 4 Digits of Social Security #: _____ Date _____

Setting Type:

Center-Based Preschool _____ Center-Based Infant/Toddler _____ Family Child Care _____ Home Visitor _____

I request a waiver as: [] Early Childhood Education Reviewer [] CDA Renewal Candidate

List below the qualification(s) you do **not** meet:

List below any qualifications you wish to substitute and attach copies of supporting documentation (if applicable):

Address:

Daytime Telephone # of Person Requesting Waiver: _____

**Please return completed form to: The Council for Professional Recognition
2460 16th St. NW
Washington DC 20009**

For Council Use Only:

[] Waiver request granted by _____ Date: _____

[] Waiver denied by:

Waiver valid for:

- [] 12 months from the above date
- [] One time use, for CDA identified above
- [] One time use, for ECE Reviewer identified above
- [] Other