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	ased 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 [] Waiver denied by: Waiver valid for: [] 12 months from the [] One time use, for C [] One time use, for E [] Other	