



2460 16th Street NW, Washington DC 20009-3547
202-265-9090 • 800-424-4310 • Fax: 202-265-9161

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CDA RENEWAL APPLICATION FORM

RENEWAL CANDIDATE INFORMATION

Date of Original CDA Credential: _____ ID #: _____
Setting of Original Credential: Family Child Care _____ Infant/Toddler _____ Preschool _____ Home Visitor _____
Bilingual Family Child Care _____ Bilingual Preschool _____ Bilingual Infant/Toddler _____ Bilingual Home Visitor _____
Current Setting/Position: _____

Personal Data (Please Print):

Last Name _____ First Name _____ Middle Initial _____
Street Address _____ Apt. # _____
City _____ State _____ ZIP Code _____
Home Phone (____) _____ Work Phone (____) _____ Email _____

Please Read and Sign Below:

"I am enclosing a check or money order in the amount of \$50.00 for the Renewal Fee, payable to the Council for Professional Recognition. I testify that I have read the requirements of the CDA Renewal System, and I have met all requirements. I understand that individuals convicted of a crime involving child abuse or neglect are ineligible to apply for or hold the CDA Credential. If I am awarded a CDA Renewal Credential and the right to use the title *Child Development Associate* and its abbreviation, *CDA*, in connection with my name, I agree to meet the standards of the Child Development Associate to the best of my ability, to conduct myself in a professional manner, and to abide by the profession's Code of Ethical Conduct. I testify that all answers given are true to the best of my knowledge."

Renewal Candidate's Signature

Date

EARLY CHILDHOOD EDUCATION REVIEWER INFORMATION

Personal Data (Please Print):

Last Name _____ First Name _____ Middle Initial _____
Street Address _____ Apt. # _____
City _____ State _____ ZIP Code _____
Home Phone (____) _____ Work Phone (____) _____ Email _____

Please Read and Sign Below:

"I testify that I have read the requirements of the CDA Renewal System and for Early Childhood Education Reviewers and have met all requirements, including current knowledge of CDA Renewal Candidate's skills and abilities working with young children."

Early Childhood Education Reviewer's Signature

Date

Summary

What Do I Have to Do to Renew My CDA Credential?

Site Manager	_____	Select an Early Childhood Education Reviewer to complete a Letter of Recommendation and enclose with Application.
Training Specialist	_____	Request a letter on official letterhead verifying 80 hours of current work experience in an appropriate setting and enclose with Application.
Applicant	_____	Make a copy of current First Aid Certificate and enclose with Application.
Training Specialist	_____	Make a copy of recent transcripts or CEU certificates and enclose with Application.
Training Specialist	_____	Enclose a letter or photocopy of membership card providing proof of membership in a national or local early childhood association.
Training Specialist	_____	Enclose with the Application a check or money order for \$50.
Training Specialist	_____	Mail the Application to the Council for Professional Recognition, 2460 16th Street, NW, Washington, DC 20009-3575.
Applicant	_____	Complete Application

