

**PENSACOLA JUNIOR COLLEGE
CHILD DEVELOPMENT ASSOCIATE
CREDENTIAL TRAINING (CDA)
APPLICATION FOR EQUIVALENCY CERTIFICATE**

Name _____
Last First Middle

Mailing Address _____
Street City State Zip

Social Security Number _____ Telephone: Hm _____ Wk _____

EDUCATIONAL RECORD

*** In order to be eligible for a CDA Equivalency, a student must have a high school diploma or GED.**

High School Graduation:

Name	City	State	Date of Graduation
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Institutions of Higher Education Attended:

Institution	Dates of Attendance	Major	Degree/Date
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***WORK EXPERIENCE IN EARLY CHILDHOOD SETTING**

*In order to be eligible for a CDA Equivalency, the student must have 480 hours of work with children in an early childhood setting.

<u>Dates</u>	<u>Employer</u>	<u>Address & Phone</u>	<u>Position</u>
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1. _____

Approximate number of hours in this position: _____

2. _____

Approximate number of hours in this position: _____

3. _____

Approximate number of hours in this position: _____

***TRAINING**

*In order to be eligible for a CDA equivalency, the student must complete either option 1 or option 2 to document the 120 clock hours of formal training and must have been observed by a qualified observer.

COURSE WORK IN CDA PROGRAM:

Option 1

<u>Course</u>	<u>Semester Taken</u>	<u>Instructor</u>	<u>Grade</u>
CHD 1104 Introduction to Child Care	_____	_____	_____
DEP 2001 Child Development	_____	_____	_____
CHD 1800 Management of Child Care	_____	_____	_____
CHD 2432 Early Childhood Practicum or CHD 2949 Cooperative Education	_____	_____	_____

Option 2

<u>Course</u>	<u>Semester Taken</u>	<u>Instructor</u>	<u>Grade</u>
W 00025 Introduction to Child Care Skills /Infant-Toddler	_____	_____	_____
Or			
W 00026 Introduction to Child Care Skills/Preschool	_____	_____	_____
Or			
W 00027 Introduction to Child Care Skills/School Age	_____	_____	_____
W 00105 Master CD	_____	_____	_____
S 00448 Observing and Recording CDA Competencies	_____	_____	_____

COMPLETED APPLICATION MUST BE NOTARIZED

I testify that all answers on this Application are true.

State of _____ County of _____

The foregoing instrument was acknowledge before me this _____ by

_____ who is personally known to me or who has produced

_____ as identification and who did or did not take an oath.
