



## **Child Development Associate**

### REIMBURSEMENT APPLICATION July 1, 2020 —June 30, 2021

We're pleased to support your professional development! Follow the guidelines and submit your application to receive reimbursement for your Child Development Associate (CDA) Certification application or renewal—up to \$500 until June 30!

#### **ELIGIBILITY CRITERIA: Must meet all criteria.**

- My membership in the Alaska SEED Registry is current/active.
- My CDA application/renewal fee has NOT been fully covered by other financial aid.
- I am an early childhood or school-age professional operating or working as a paid employee of a licensed (State of Alaska or Municipality of Anchorage) child care facility, Head Start, or pre-elementary school district program, or a State of Alaska Child Care Assistance Program approved child care facility.

#### **GUIDELINES FOR REIMBURSEMENT**

Pursuing or renewing your CDA? Follow these guidelines to receive up to \$500 for one CDA application or renewal fee, pre-paid directly to the Council for Professional Recognition, or as a 100% reimbursement to you. You will NOT be required to provide proof you earned the CDA Credential in order to submit the CDA reimbursement application.

#### **CDA Application**

#### **CDA Renewal**

#### Allowable Reimbursement Amount\*

- Up to \$425 online fee
- Up to \$500 paper application via U.S. mail
- Up to \$125 online fee
- Up to \$150 paper application via U.S. mail

# Required Documentation (Electronic, scan, photocopy accepted)

• For reimbursement, submit proof of payment made to Council for Professional Recognition (receipt, canceled check, credit card or bank statement, etc.) with your name and date of payment.

#### **Deadlines**

- For CDA application or renewal fee paid directly to the Council for Professional Recognition, payment must have been made to the Council within the past 60 business days.
- Reimbursement will be made within 45 business days from **completed** application receipt date. Funding is on a first come, first serve basis.

\*CDA reimbursements will be reduced by the amount of other scholarships and/or financial aid you have already received.





3350 Commercial Drive, Suite 203 | Anchorage, AK 99501 | info@seedalaska.org

Telephone: 907.265.3194 | **Toll Free: 1.855.265.7333** Fax: 907.265.3195 | **Toll Free Fax: 1.855.265.3195** 







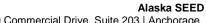
## Child Development Associate REIMBURSEMENT APPLICATION

July 1, 2020 —June 30, 2021

Please print in **black** or blue ink or complete electronically, and then print and sign your application. Incomplete, illegible, or incorrect applications will not be processed. Funding is on a first come, first serve basis. \* = REQUIRED FIELD.

APPLICANT INFO				
*Last Name:		*Active A	Alaska SEED member: □	
	*Phone:			
Infant-Toddler CDA	☐ Family Child Care CDA ☐ Home Visitor CDA			
APPLICANT FA	CILITY INFO			
			cility is licensed or approved: Center □ Group Home □ Home	
REIMBURSEN	IENT INFO			
☐ Renewal Fee	*Amount Requested: \$			
digit Customer ID Num	nber Issued by the (	Council:		
card with an employee's n	ame on the card will be	paid to the prograr	m, not the individual)  *Zip:	
s (*) are filled in. cluded my Council ID N clication or renewal fee nt with candidate's nam ith this application. address provided is inci- ent bank fee will be dec- cation is true and accur	umber above. was paid within the properties and date of payme complete, incorrect, of ducted from the replace at the to the best of my	nt are attached. In the check is lost icement check.  The knowledge. Falst	Proof of earning the CDA t and a replacement check	
	*Last Name:  Infant-Toddler CDA  APPLICANT FACE  Renewal Fee  Bigit Customer ID Nume  Card with an employee's number of the card with an employee's number of the card with candidate's name of the card with candidate's name in the card will be decent with card accurate the car	*Phone:  Infant-Toddler CDA	*Phone:    *Phone:     *Phone:	

#### Please submit your SIGNED completed application via email (scanned copies), fax, mail to:



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