


Child Development Permit Overview



Qualifications and How to Apply
Child Development Training Consortium
www.childdevelopment.org



Training Agenda

- Commission on Teacher Credentialing (CTC) Contact Information
- Child Development Permit Services of the Child Development Training Consortium (CDTC)
- Child Development Permit Matrix
- Child Development Permit Application
 - State Form 41-4
 - State Form OA-EF
 - Live Scan Fingerprinting Form 41-LS
 - Live Scan Reimbursement Form
 - Verification of Experience Form
 - Licensed Family Child Experience Form
 - Master Teacher Specialization Form
 - CDTC Permit Application



Commission on Teacher Credentialing (CTC) Contact Information

- Web Site – www.ctc.ca.gov
- Email – credentials@ctc.ca.gov
- Phone – (916) 322-4974 M – F 12:30 PM to 4:30 PM



CDTC Contact Information

Web Site –

www.childdevelopment.org

Email – cdtc-permit@yosemite.edu

Main Phone Line – (209) 572-6080



CDTC Permit Funding

CDD Permit funding requirements

- Live or Work in CA
- Employed or not employed
- Can work with School Age
- Permit Funding Levels - First-time, upgrade, renewal of Assistant, Associate Teacher and Teacher and upgrades from one of the three lower level permits
- Reimbursement of on-line renewal fees for Teacher Permit only



CDTC Role in Processing

- Provide an application (web site)
- Provide technical assistance
- Audit permit application for completeness
- Pay processing fee to CTC
- Reimburse Live Scan processing fee for eligible first-time applicants



Child Development Permit

- All permits are valid for 5 years
- All permits have a renewal requirement

Assistant – Professional Growth Hours

Associate Teacher - additional 15 units
towards the Teacher Permit

Teacher - Professional Growth hours

Master Teacher – Professional Growth Hours

Site Supervisor – Professional Growth Hours

Program Director – Professional Growth Hours



Unit Requirements for the Child Development Permit

- All unit requirements are semester units (quarter unit equals $\frac{2}{3}$ of semester unit)
- Units must be obtained from regionally accredited institution
- ECE/Child Development units cannot count toward the General Education requirement



Unit Requirements for the Child Development Permit - Continued

- Courses completed with grade “C” or higher or credit
- Units completed outside of USA must be evaluated by CTC approved agency
- Different options to apply



CTC Acceptable Regional Accrediting Bodies

MSA - Middle States Association of Colleges and Schools

NWCCU - Northwest Commission on Colleges and Universities

NCA - North Central Association of Colleges and Schools

NEASC-CIHE - New England Association of Schools and
Colleges, Inc./Commission on Institutions of Higher
Education

SACS-CC - Southern Association of Colleges and Schools/
Commission on Colleges

WASC-Jr. - Western Association of Schools and Colleges/
Accrediting Commission for Community and Junior
College

WASC-Sr. - Western Association of Schools and Colleges/
Accrediting Commission for Senior Colleges and
Universities

Child Development Permit Matrix

Child Development Permit Matrix - with Alternative Qualification Options Indicated					
Permit Title	Education Requirement (Option 1 for all permits)	Experience Requirement (Applies to Option 1 Only)	Alternative Qualifications (with option numbers indicated)	Authorization	Five Year Renewal
Assistant (Optional)	Option 1: 6 units of Early Childhood Education (ECE) or Child Development (CD)	None	Option 2: Accredited HERO program (including ROP)	Authorizes the holder to care for and assist in the development and instruction of children in a child care and development program under the supervision of an Associate Teacher, Teacher, Master Teacher, Site Supervisor or Program Director.	105 hours of professional growth*****
Associate Teacher	Option 1: 12 units ECE/CD including core courses**	50 days of 3+ hours per day within 2 years	Option 2: Child Development Associate (CDA) Credential.	Authorizes the holder to provide service in the care, development, and instruction of children in a child care and development program, and supervise an Assistant and an aide.	Must complete 15 additional units toward a Teacher Permit. Must meet Teacher requirements within 10 years.
Teacher	Option 1: 24 units ECE/CD including core courses** plus 16 General Education (GE) units*	175 days of 3+ hours per day within 4 years	Option 2: AA or higher in ECE/CD or related field with 3 units supervised field experience in ECE/CD setting	Authorizes the holder to provide service in the care, development and instruction of children in a child care and development program, and supervise an Associate Teacher, Assistant and an aide.	105 hours of professional growth*****
Master Teacher	Option 1: 24 units ECE/CD including core courses** plus 16 GE units* plus 6 specialization units plus 2 adult supervision units	350 days of 3+ hours per day within 4 years	Option 2: BA or higher (does not have to be in ECE/CD) with 12 units of ECE/CD, plus 3 units supervised field experience in ECE/CD setting	Authorizes the holder to provide service in the care, development and instruction of children in a child care and development program, and supervise a Teacher, Associate Teacher, Assistant and an aide. The permit also authorizes the holder to serve as a coordinator of curriculum and staff development.	105 hours of professional growth*****
Site Supervisor	Option 1: AA (or 60 units) which includes: • 24 ECE/CD units with core courses** plus 6 administration units plus 2 adult supervision units	350 days of 3+ hours per day within 4 years including at least 100 days of supervising adults	Option 2: BA or higher (does not have to be in ECE/CD) with 12 units of ECE/CD, plus 3 units supervised field experience in ECE/CD setting; <u>or</u> Option 3: Admin. credential*** with 12 units of ECE/CD, plus 3 units supervised field experience in ECE/CD setting; <u>or</u> Option 4: Teaching credential**** with 12 units of ECE/CD, plus 3 units supervised field experience in ECE/CD setting	Authorizes the holder to supervise a child care and development program operating at a single site; provide service in the care, development, and instruction of children in a child care and development program; and serve as a coordinator of curriculum and staff development.	105 hours of professional growth*****
Program Director	Option 1: BA or higher (does not have to be in ECE/CD) including: • 24 ECE/CD units with core courses** plus 6 administration units plus 2 adult supervision units	One year of Site Supervisor experience	Option 2: Admin. credential*** with 12 units of ECE/CD, plus 3 units supervised field experience in ECE/CD setting; <u>or</u> Option 3: Teaching credential**** with 12 units of ECE/CD, plus 3 units supervised field experience in ECE/CD setting, plus 6 units administration; <u>or</u> Option 4: Master's Degree in ECE/CD or Child/Human Development	Authorizes the holder to supervise a child care and development program operating in a single site or multiple sites; provide service in the care, development, and instruction of children in a child care and development program; and serve as coordinator of curriculum and staff development.	105 hours of professional growth*****
<p>NOTE: All unit requirements listed above are semester units. All course work must be completed with a grade of C or better from a regionally accredited college. Spanish translation is available.</p> <p>*One course in each of four general education categories, which are degree applicable: English/Language Arts; Math or Science; Social Sciences; Humanities and/or Fine Arts.</p> <p>**Core courses include child/human growth & development; child/family/community or child and family relations; and programs/curriculum. You must have a minimum of three semester units or four quarter units in each of the core areas.</p> <p>***Holders of the Administrative Services Credential may serve as a Site Supervisor or Program Director.</p> <p>****A valid Multiple Subject or a Single Subject in Home Economics.</p> <p>*****Professional growth hours must be completed under the guidance of a Professional Growth Advisor. Call (209) 572-6080 for assistance in locating an advisor.</p>					

This matrix was prepared by the Child Development Training Consortium. To obtain a permit application visit our website at www.childdevelopment.org or call (209) 572-6080.

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Early Childhood Education (ECE) Core Units

- Child Growth & Development
- Child/Family & Community
- Programs/Curriculum

Must complete a minimum of 3 semester
units in each core area



General Education (GE) Core Units

- English/Language Arts
- Humanities
- Social Science
- Math/Science

Minimum total of 16 semester units
Courses must be degree applicable



Experience



- Minimum of 3 hours a day to count as a day of experience
- Volunteer experience counts toward the experience requirement
- Licensed Family Child Care
- Student teaching in Kindergarten is an acceptable supervised field experience in a ECE setting



Assistant

Option 1

- 6 units of ECE
- No days of experience

Option 2

- ROP



Associate Teacher

Option 1

- 12 ECE units - minimum of three semester units from each of the 3 core areas
- 50 days of experience within the last 2 years



Associate Teacher

Option 2 – No Days of Experience

- CDA Credential
- CDA Credential only equals 9 ECE units towards Teacher Permit



Associate Teacher Renewal

- Initial Associate Teacher Permit valid for 5 years
- Can renew one time only
- Must complete additional 15 units towards the Teacher level permit
- Remedial units do not count towards renewal
- No extension if renewal requirement not met



Teacher

Option 1

- 24 ECE units – including core units
- 16 GE units
- 175 days of experience within the last 4 years



Teacher

Option 2 – No Days of Experience

- AA or higher in ECE/CD or Human Development with 3 units of supervised field experience in an ECE/CD setting



Master Teacher

Option 1

- 24 ECE units - including core units
- 6 specialization units (one area of focused study)
- 2 adult supervision units
- 16 GE units
- 350 days of experience



Master Teacher

Option 2 – No Days of Experience

- BA or higher (does not have to be in ECE/CD)
- 12 ECE units – do not have to be core units
- 3 units supervised field experience in a ECE/CD setting
- Student teaching in kindergarten will count towards the field experience, but needs an original letter on letterhead documenting the placement in kindergarten



Site Supervisor

Option 1

- AA or 60 units, including the following
- 24 ECE units – including core units
- Plus 6 administration units
- Plus 2 adult supervision units
- 16 GE units
- 350 days of experience including 100 days of supervising



Site Supervisor

Option 2 – No Days of Experience

- BA or higher (does not have to be in ECE/CD)
- 12 ECE units – do not have to be core units
- 3 units supervised field experience in an ECE/CD setting
- Student teaching in kindergarten will count towards the field experience, but needs an original letter on letterhead documenting the placement in kindergarten



Site Supervisor

Option 3 – No Days of Experience

- Administrative Credential
- 12 ECE units – do not have to be core units
- 3 units supervised field experience in an ECE/CD setting



Site Supervisor

Option 4 – No Days of Experience

- Valid Multiple Subject Credential
- 12 ECE units – do not have to be core units
- 3 units supervised field experience in an ECE/CD setting



Program Director

Option 1

- BA or higher (does not have to be in ECE/CD)
- 24 ECE units - including core units
- Plus 6 administration units
- Plus 2 adult supervision units
- 1 year of site supervisor experience



Program Director

Option 2 – No Days of Experience

- Administrative Credential
- 12 ECE units – do not have to be core units
- 3 units supervised field experience in an ECE/CD setting



Program Director

Option 3 – No Days of Experience

- Valid Multiple Subject Credential
- 12 ECE units – do not have to be core units
- 6 administration units
- 3 units supervised field experience in an ECE/CD setting



Program Director

Option 4 – No Days of Experience

- Masters degree in ECE/CD or Human Development
- No other Master's degrees will be accepted by the Commission on Teacher Credentialing



Commission on Teacher Credentialing (CTC)

- CTC no longer prints the permit documents
- Your email is required on the 41-4, the CTC will email you 48 hours prior to posting of your permit on their web site.
- Follow the status of the permit at CTC from their web site at www.ctc.ca.gov. You must select “Credential Information”, second page select “Educator Login” and follow the prompts.

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APPLICATION FOR CREDENTIAL AUTHORIZING PUBLIC SCHOOL SERVICE (For Privacy Act Notification see Application Instructions)	
Mail application and payment (check or money order) to: Commission on Teacher Credentialing Certification Division 1900 Capitol Avenue Sacramento, California 95811-4213	
Appeal: _____ Route to: _____	
Commission Use Only: Fee Information	
APP	PP Other
1. PERSONAL INFORMATION (type or print)	
CTC Use Only	
IHE/County/District Use Only	
Issuance Date: _____ Email Address: _____	
*Social Security or Individual Tax ID Number: _____ *Date of Birth: (mm/dd/yyyy) _____	
*Applicant's Name: _____	
First Middle Last	
Former/Maiden Name(s): _____ County or District of Employ (CA only): _____	
*Address: _____	
*City: _____ *State: _____ *Zip: _____	
Home Phone: _____ Work Phone: _____ Message Phone: _____	
*Email Address: _____	
2. CREDENTIAL TYPE (choose only one type below) OPTIONS: _____	
Substitute Permits (PT)	
English Learner Authorizations	
Single Subject (Secondary Teaching)	
BILINGUAL AUTHORIZATION - Specify Language	
Specify Subject (If you are requesting more than one subject, enter it in Comments box.)	
Services Credentials	
Specify World Language other than English (If applicable)	
Term _____	
Specify Other Health Services	
Multiple Subject (Elementary Teaching)	
Child Development Permits (PK)	
School-Age Emphasis	
Term _____	
Designated Subjects (PW)	
Subject(s) _____ Term _____	
Education Specialist (Special Education)	
(If you are requesting more than one specialty area, enter it in Comments.)	
Specify Specialty Area	
Supplementary Authorization(s) (PJ)	
Other Specialist Credentials	
Subject Matter Authorization(s) (PJ)	
Term _____	
Added Authorizations (AASE)	
CTC Use Only	



As the holder of a **Child Development Permit** (any level except the **Associate Teacher Permit**) you must complete a specific number of planned and approved professional growth activities for each five-year renewal. These activities must be recorded on the **Professional Growth Plan and Record** form. As the holder of a **Child Development Permit** choosing to self-verify completion of these requirements, you may be subject to an audit. The Commission reserves the right to request submission of these forms for auditing purposes any time within one year following submission of this application. If the Commission determines through its audit that you did not complete the professional growth requirements, your permit will not be renewed and you may be subject to adverse action on other credentials you currently hold. You must retain your **Professional Growth Plan and Record** form for one year following the submission of this application.

I certify (or declare) that I have read the above and completed the following for this renewal of my clear credential:

My Professional Growth Advisor Is _____

_____ Advisor's Name	_____ Advisor's Phone Number
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Answers to the following questions are required. If you answer yes to any question, you must complete the corresponding [Professional Fitness Explanation Form](#).

- Federal Bureau of Investigation criminal history (rap sheet)
- California Department of Justice criminal history (rap sheet)
- International database of teacher misconduct maintained by the National Association of State Directors of Teacher Education and Certification (NASDTEC)
- Previous reviews by the Commission
- Complaints from others
- Notifications from school districts
- Teacher preparation test score violations

- It happened a long time ago
- It happened in another state, federal court, military or jurisdiction outside the United States
- You did not go to court and your attorney went for you
- You did not go to jail or the sentence was only a fine or probation
- You received a certificate of rehabilitation
- Your conviction was later dismissed (even if under Penal Code section 1203.4), expunged, set aside or the sentence was suspended



- That the information you provide is true and correct;
- That you understand any and all Instructions related to your application;
- The Commission may reject your application if it is incomplete and it will be delayed;
- Failure to disclose any information requested is falsification of your application and the Commission may reject or deny your application or take disciplinary action against your credential.

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<p>a. Have you ever been:</p> <ul style="list-style-type: none">• dismissed or,• non-re-elected or,• suspended without pay for more than ten days, or• retired or,• resigned from, or otherwise left school employment <p>because of allegations of misconduct or while allegations of misconduct were pending?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>b. Have you ever been convicted of any felony or misdemeanor in California or any other place?</p> <p>You must disclose:</p> <ul style="list-style-type: none">• all criminal convictions• misdemeanors and felonies• convictions based on a plea of no contest or nolo contendere• convictions dismissed pursuant to Penal Code Section 1203.4• driving under the influence (DUI) or reckless driving convictions• no matter how much time has passed <p>You do not have to disclose:</p> <ul style="list-style-type: none">• misdemeanor marijuana-related convictions that occurred more than two years prior to this application, except convictions involving concentrated cannabis, which must be disclosed regardless of the date of such a conviction.• infractions (DUI or reckless driving convictions are <u>not</u> infractions) <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>c. Are you currently the subject of any inquiry or investigation by any law enforcement agency or any licensing agency in California or any other state?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>d. Are any criminal charges currently pending against you?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>e. Have you ever had any credential, including but not limited to, any Certificate of Clearance, permit, credential, license or other document authorizing public school service, revoked, denied, suspended, publicly reprimanded, and/or otherwise subjected to any other disciplinary action (including an action that was stayed) in California or any other state or place?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

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f. Have you ever had any professional or vocational (not teaching or educational) license revoked, denied, suspended, and/or otherwise subjected to any other disciplinary action (including an action that was stayed) in California or any other state or place?

☐ Yes

☐ No

5. CHILD ABUSE AND NEGLECT MANDATED REPORTING

As a document holder authorized to work with children, it is part of my professional and ethical duty to report every instance of child abuse or neglect known or suspected to have occurred to a child with whom I have professional contact.

I understand that I must report immediately, or as soon as practicably possible, by telephone to a law enforcement agency or a child protective agency, and will send a written report and any evidence relating to the incident within 36 hours of becoming aware of the abuse or neglect of the child.

I understand that reporting the information regarding a case of possible child abuse or neglect to an employer, supervisor, school principal, school counselor, coworker, or other person is not a substitute for making a mandated report to a law enforcement agency or a child protective agency.

I understand that the reporting duties are individual and no supervisor or administrator may impede or inhibit my reporting duties.

I understand that once I submit a report, I am not required to disclose my identity to my employer.

I understand that my failure to report an instance of suspected child abuse or neglect as required by the Child Abuse and Neglect Reporting Act under Section 11166 of the Penal Code is a misdemeanor punishable by up to six months in jail or by a fine of one thousand dollars (\$1,000), or by both that imprisonment and fine.

I acknowledge and certify that as a document holder, I will fulfill all the duties required of a mandated reporter.

☐ I agree

6. EMPLOYING AGENCY INFORMATION

This section must be completed for all credential, certificate, and permit types where service is restricted to an employing agency.

County CDS Code _____ School District CDS Code _____

Charter School/Non-Public School or Agency/Statewide Agency Name _____

Applications for One-Year Nonrenewable Credentials, Provisional Internship Permits, Short-Term Staff Permits, Limited Assignment Permits, and Emergency Permits (except 30-Day or Prospective Substitute Teaching Permits), must be filed through the employing agency. Employers must have an annual Declaration of Need for Fully Qualified Educators on file with the Commission prior to the submission of any applications for Limited Assignment or Emergency Permits.

Before submitting, check application for completeness:

- 1) Personal information with correct SSN, date of birth, and email address filled in on page 1
- 2) Type of credential clearly marked on page 1 (use box below for additional subject/authorization requests)
- 3) All Professional Fitness Questions marked Yes or No on pages 3 and 4
- 4) Read and agreed to your responsibilities as a mandated reporter
- 5) Payment (check or money order attached to the front of this form). See [Credential Leaflet CL-659](#) for fee schedule.



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Checks or money orders may be made payable to the Commission on Teacher Credentialing. The Commission does not accept cash payments. All application fees are non-refundable.

Applications submitted that are incomplete or without the appropriate fee included will not be processed and will be returned.

7. OATH AND AFFIDAVIT

I solemnly swear (or affirm) that I will support the Constitution of the United States of America, the Constitution of the State of California, and the laws of the United States and the State of California. I hereby certify (or declare) under penalty of perjury under the laws of the State of California that all the foregoing statements in this application are true and correct.

Date _____ City _____ County _____ State _____

SIGNATURE OF APPLICANT _____

Comments/Additional Subject Requests:



Yes Answers to Professional Fitness Questions on 41-4 and 41-REN

- ▶ You must complete OA-EF Personal and Professional Fitness Explanation Form and add any additional documentation for each yes answer
- ▶ The following 2 slides are examples of the form

Personal and Professional Fitness Explanation Form OA-EF



Personal and Professional Fitness Explanation Form

The Personal and Professional Fitness section of each application contains seven questions. If you answered yes to any of these questions, you must submit an Explanation Form **for each incident**, even if the incident was previously disclosed. If you are reporting convictions, each conviction must be disclosed on a separate explanation form.

Scope of Questions:

Questions a and e relate to actions by an employer.
Questions b and d relate to actions by a court or law enforcement agency.
Question c relates to actions by a court, law enforcement agency, or licensing agency regarding alleged misconduct that involved children or took place on school property.
Questions f and g relate to actions by a licensing agency.

Special note regarding criminal convictions or pending criminal charges:

You are required to disclose all misdemeanor or felony criminal convictions including those based on a plea of no contest. You must disclose a conviction no matter how much time has passed, even if the case has been dismissed pursuant to Penal Code section 1203.4. In accordance with Health & Safety Code sections 11361.5 and 11361.7, you may omit misdemeanor marijuana-related convictions that occurred more than two years prior to this application, except convictions involving concentrated cannabis, which must be disclosed regardless of the date of such a conviction.

Using this form:

This form contains five sections. Determine which sections apply to each incident and complete the required information.

If you answered yes to...	Complete the following section of this form... (click the section number to be transported to that section)
Question a	Section 1
Question b	Section 2
Question c	Section 3
Question d	Section 4
Question e	Section 1
Question f	Section 5
Question g	Section 5

Personal and Professional Fitness Explanation Form OA-EF

Section 1: Required information for yes answer to Personal and Professional Fitness Question a or e.

For question a, indicate the action taken:	
<input type="checkbox"/> Dismissed	Effective date: _____
<input type="checkbox"/> Retired	Effective date: _____
<input type="checkbox"/> Resigned	Effective date: _____
<input type="checkbox"/> Non-reelected	Effective date: _____
<input type="checkbox"/> Suspended without pay	Effective dates: _____

For question e, describe the disciplinary action that is pending:

Name of employer at time of action or pending action:	
Address:	
Telephone number:	Contact person (if known):

Describe in detail the incident(s) that resulted in the above action or pending disciplinary action (attach additional sheets if necessary):

Provide available copies of the following documents regarding the above-action: district investigation reports, police reports, Statement of Charges, Accusations, request for hearing, final decision, letter of resignation or retirement, and settlement agreements.



Teacher Online Renewal

- Child Development Teacher Permits should be renewed online on the CTC web site at www.ctc.ca.gov.
- You must use a credit or debit card and will be charged a \$2.50 service fee.
- Processing time is 3-5 business days.
- CDTC can reimburse \$100 of the renewal fee

41-LS

REQUEST FOR LIVE SCAN SERVICE


FORM 41-LS Rev. 0415

Applicant Submission

ORI: A0281		Type of Application: License/Certification/Permit	Section 1
Code assigned by DOJ			
Job Title or Type of License, Certification or Permit: TEACHER CRED 44340 EC			
Section 2			
Agency Address Set Contributing Agency:			
CASM TEACHER CREDENTIALING		03294	
Agency authorized to receive criminal history information		Mail Code (five-digit code assigned by DOJ)	
1900 Capitol Avenue			
Street No.	Street or PO Box	Contact Name (Mandatory for all school submissions)	
Sacramento	CA	95811-4213	
City	State	Zip Code	Contact Telephone No.
Section 3			
*Name of Applicant: Last First MI			
(Please print)			
*Alias: Last First		*Driver's License No:	
*Date of Birth: *Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Misc. No. BIL - Agency Billing Number	
*Height: *Weight:		Misc. Number:	
*Eye Color: *Hair Color:		*Home Address:	
		Street No. Street or PO Box	
*Place of Birth:		City, State and Zip Code	
*Social Security Number (full):		* Required Fields	
Section 4			
*OCA Number: (SSN OR ITIN#)		Level of Service: <input checked="" type="checkbox"/> DOJ <input checked="" type="checkbox"/> FBI	
If resubmission, list Original ATI Number:			
Section 5			
SUPPLEMENTAL AGENCY/EMPLOYER (County Office of Education/School District)			
Employer Name			
Street No.	Street or PO Box	Mail Code (COE/SD five digit code assigned by DOJ)	
City	State	Zip Code	Agency Telephone No. (optional)
Section 6			
Live Scan Transaction Completed By: Name of Operator LSID Date			
Transmitting Agency ATI No. Amount Collected/Billed			

ORIGINAL - Live Scan Operator; SECOND COPY - Applicant; THIRD COPY (if needed) - Requesting Agency

CDTC LS Reimbursement

 Live Scan Fingerprint Processing Fee Reimbursement Request Form		For CDTC Staff Use Only	
		Staff Initials:	Approved Payment:
Instructions: <ul style="list-style-type: none"> • Complete every question, sign, and date certification statement (#15) • Attach the ORIGINAL RECEIPT showing the billed and paid Live Scan processing fees <ul style="list-style-type: none"> ◦ If given a copy of the 41-LS as a receipt, an original signature and date from the Live Scan operator must be included on the photocopy • Include with the Child Development Permit Stipend Request Form and Permit Application Packet 			
Policies: <ul style="list-style-type: none"> • Only first-time applicants at the three lower level permits are eligible for Live Scan FBI and DOJ fingerprint processing fee reimbursement • Only Live Scan fingerprints sent electronically to the Commission on Teacher Credentialing are eligible for reimbursement <ul style="list-style-type: none"> ◦ Fingerprints for Department of Social Services are not reimbursable • Reimbursement is limited to FBI and DOJ fees only • Reimbursement payment can only be issued to the applicant or employer • Reimbursements are processed on a first come, first serve basis. • Funding is limited • Please allow 4-6 weeks for processing • Reimbursement will be returned unprocessed if funds are expended or applicant does not qualify based on the reimbursement policies 			
1) Last Name:		2) First Name:	
3) Last Five Digits of Social Security Number: ____ - ____ - ____		4) Birthdate (mm/dd/yyyy):	
5) Reimbursement Check Issued To (select only one): <input type="checkbox"/> Permit Applicant <input type="checkbox"/> Employer <input type="checkbox"/> Other Agency Note: The check will be issued by the Yosemite Community College District			
6) Name to Appear on Check:			
7) Mailing Address for Check:			
8) City:		9) State:	10) Zip code:
11) Permit Applicant Contact Phone: ()			
12) Permit Applicant Work Phone, if applicable: ()			
13) Permit Applicant Email:			
14) Permit Level Applying For (select only one): <input type="checkbox"/> Assistant <input type="checkbox"/> Associate Teacher <input type="checkbox"/> Teacher			
15) I hereby certify that this Live Scan Fingerprint Processing Fee Reimbursement Request Form is true and correct, and that an acceptable receipt is attached, documenting the actual costs.			
Applicant's Signature:		Date:	

For assistance email CDTC-Permit@yosemite.edu or call (209) 572-6080

CDTC V of E center



Child Development Permit Application Verification of Experience

If a child development permit requires experience to be eligible:

- Have the experience verified by current and/or previous employer
- Only verify experience required for the applicable permit level
- Complete a separate verification form for each position and/or employer served to equal required experience for permit level
- Submit this form with the completed Child Development Permit application packet
- DO NOT mail this form separately to the Child Development Training Consortium or the California Commission on Teacher Credentialing

Check the permit level (experience required is indicated below).

Permit Level	Required Experience
<input type="checkbox"/> Assistant	None
<input type="checkbox"/> Associate Teacher	50 days of 3 or more hours per day within the past 2 years
<input type="checkbox"/> Teacher	175 days of 3 or more hours per day within the past 4 years
<input type="checkbox"/> Master Teacher	350 days of 3 or more hours per day within the past 4 years
<input type="checkbox"/> Site Supervisor	350 days of 3 or more hours per day within the past 4 years, which includes a minimum of 100 days of supervising adults
<input type="checkbox"/> Program Director	Site Supervisor status and one program year of site supervisor experience

This is to verify/certify that:	_____ (Name of applicant)	
has served satisfactorily from:	_____ (Month and Year)	to: _____ (Month and Year)
in the position of:	_____ (Job Title)	
with the following age group(s):	_____	
in the following capacity:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Day-to-Day Substitute Number of hours per day: _____ Number of days per week: _____ Total number of days worked at least 3 hours per day: _____	
Documentation of supervising experience for the Site Supervisor Permit: (minimum 100 days)	From (month/year): _____ To (month/year): _____ Responsibilities: _____	
Employer:	School/Agency Name: _____ Address: _____ City: _____ Zip: _____ Phone: _____	
Verified by: (current and/or previous employer)	Signature: _____ Name (please print): _____ Title: _____ Date: _____ Phone: _____	

CTC V of E FCC

 <div>State Of California Commission On Teacher Credentialing Certification, Assignment and Waivers Division Box 944770 Sacramento, CA 94244-2700</div>	<div>Telephone: (916) 445-7254 or (888) 921-2682 E-mail: credentialed@ctc.ca.gov Website: www.ctc.ca.gov</div>	
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**CHILD DEVELOPMENT PERMIT
VERIFICATION OF FAMILY CHILD CARE EXPERIENCE**

This form should be completed by individuals that operate a family home child care facility to verify family child care experience. The experience must be obtained while holding a Small or Large Family Child Care Home License issued by the California Department of Social Services.

• Do not mail this form directly to the Commission. It must be submitted with a child development permit application packet.

Check One:

Permit Level	Required Experience
<input type="checkbox"/> Assistant	None Required
<input type="checkbox"/> Associate Teacher	50 days of 3+ hours/day within 2 years
<input type="checkbox"/> Teacher	175 days of 3+ hours/day within 4 years
<input type="checkbox"/> Master Teacher	350 days of 3+ hours/day within 4 years
<input type="checkbox"/> Site Supervisor	350 days of 3+ hours/day within 4 years
<input type="checkbox"/> Program Director	(including at least 100 days of supervising) Site Supervisor status and one program year of site supervisor experience

Applicant's Full Legal Name _____
First Middle Last

Last four digits of your Social Security Number _____

I _____ have served as a **small /large** family child care provider
Name of Applicant Circle One

From _____ to _____
Month/Year Month/Year

Name of Family Child Care Facility _____

Mailing Address _____
Street
City State ZIP

☐ Attached is a copy of the Small/Large Family Child Care Home License issued by the California Department of Social Services. *Note: Site Supervisor and Program Director applicants must hold a **Large** Family Child Care Home License issued by the California Department of Social Services*

☐ Site Supervisor Applicants:
I certify that I have a minimum of 100 days of experience supervising adults.

☐ Program Director Applicants:
I certify that I have held a Large Family Child Care Home License for a minimum of one year.

I certify under penalty of perjury that all the foregoing statements are true and correct.

Signature of Applicant _____ Date _____

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CHILD DEVELOPMENT PERMIT VERIFICATION OF FAMILY CHILD CARE ATTENDANCE

This form should be completed by parents/guardians to verify attendance of their child or children in a family child care program.

► Do not have the parent/guardian mail this form directly to the Commission. It must be submitted with a child development permit application packet.

This is to certify that: _____ has provided an early care
Name of Family Child Care Provider
and education program to my child or children.

I have/had _____ children in the provider's early care and education program.
Number

The child or children attended the provider's early care and education program:

from: _____ to: _____
Begin Date End/Present Date

Name of Parent/Guardian

Name of Parent/Guardian

Signature of Parent/Guardian

Signature of Parent/Guardian



Master Teacher Specialization

Master Teacher Specialization Designation

Name: _____

If you are applying for the Child Development Master Teacher Permit under Option 1, please complete the necessary information below.

State the name of your Master Teacher Specialization:

List the course number and title for each class you are using to meet the specialization requirement. Six semester units of specialization are needed.

	Course #:	Course Title:	# of Units:
1.			
2.			
3.			
4.			
5.			
6.			
Total # of Units			

Examples of Specializations:

Infant/Toddler
Health and Safety
Teacher/Family Relationships
Children with Special Needs
School-Age Child Care
Bilingual/Bicultural
Preschool Programming
Montessori Education
Music
Family Child Care
High Scope

Note: Administration and core areas are not acceptable specializations





Questions

Contact CDTC

- Email – cdtc-permit@yosemite.edu
- Mail Line Phone– (209) 572-6080