



## *Your partner for the Child Development Associate (CDA) Credential™*

The Child Development Associate (CDA) Credential™ is the most recognized professional development benchmark for family child care providers, center-based or school setting staff. The national Council for Professional Recognition administers the CDA program and awards the CDA Credential to students that complete the program requirements.

### ***What are the qualifications?***

Individuals who earn the credential must:

- Be 18 or older
- Hold a high school diploma or equivalent
- Have 480 hours of experience working with children over the past 5 years

### ***What do I have to do to earn the CDA credential?***

Candidates for the CDA credential must complete:

- 120 hours of education in specific topic areas (CDA classes apply)
- A CDA Professional Portfolio
- A Council sponsored examination
- A CDA Observation Visit by an approved early childhood specialist

### ***How we can help you!***

Our comprehensive CDA program offers many advantages:

- Credentialed professionals who meet your style of learning
- Assistance with seeking financial support and completing applications
- Workbook, materials, and help to complete your portfolio
- One-on-one personal assistance and support to help you successfully earn the credential
- You can request your CDA Observation visit from one of our approved early childhood specialists

### ***How much does the CDA course cost?***

- The CDA Course Fee is **\$2,500**
- Financial assistance you may receive through CSEA/VOICE or EIP/PDP will be applied toward the payment and your Payment Plan will reflect any balance due.
- Students who do not qualify for any payment assistance will receive a Payment Plan to make payments more manageable over the length of the course.
- The course must be paid in full prior to the end date.

### ***Financial assistance available?***

- CSEA/VOICE - Family or Group Family child care providers may qualify for full scholarship. To obtain your CDA number visit their website at: <http://voicecsea.org/professionaldevelopment>.
- EIP/PDP - Scholarship funding may also be available through the **Educational Incentive Program**. For more information or to apply go to <https://www.ecetp.pdp.albany.edu/eip.aspx>.
  - Create an account or use an account you have already created.
  - Use your Username and Password created to enter.
  - You will need the Class Information listed below and you will be asked to submit Pg 1 of your 1040 Fed tax form and pay stub to verify gross income and employment.
  - **Day Care Center Staff** – need the Center’s License number and expiration date
  - **Group/Family Child Care Providers** – need a copy of their Registration/License
  - You are responsible to follow up on your EIP application for the status. If you have difficulties call 800-295-9616 for help.
  - When your submission has been approved by PDP you need to Accept the award in your account.
  - When Child Care Solutions sees your approved award your Award will be applied to your amount due.


### ***Class Information:***

- Training Organization: **Child Care Solutions**
- Name of Instructor: **Jean Fetzko**
- Start Date: **August 28, 2025**
- End Date: **December 11, 2025 (or Dec. 16 if make-up sessions are needed)**
- Number of Training Hours: **120**
- Cost: **\$2,500**

**CDA session starts Thursday, August 28, 2025 to Thursday, December 11, 2025.**

The course starts out in ZOOM format for the first two sessions and then will transition to in-person classroom for the remainder. Three make up sessions are built into the schedule; you will only need to attend if 1-3 sessions are missed. If a participant misses more than three sessions, the hours will be deducted from the possible 120 hours, and students must find other means to gain those hours back.

**Requirements For Registration:** return pages 3,4, keep pages 1,2,5

- \* **Complete** pages 3-4 of Registration Form **and return**
- \* We **MUST** have confirmation of your payment method (Ex: EIP Award or CSEA funding)  by **August 15<sup>th</sup>**. If none will be used you will be required to submit a \$50 registration fee before we can enroll you.
- \* See **Page 5** for full schedule

Secure your seat by registering and applying for EIP or CSEA funding as soon as possible.

Contact Information:

**Pam Borreggine**, [pamb@childcaresolutionscny.org](mailto:pamb@childcaresolutionscny.org), (315) 446-1220 Ext 302 – – for assistance with the application, applying for financial aid, or to register for this course, financial help or to make a payment.  
**Jean Fetzko**, [jeanf@childcaresolutionscny.org](mailto:jeanf@childcaresolutionscny.org), (315) 446-1220 Ext 314 any questions about the course.



## Registration Form for CDA Course August 28 - December 11, 2025

Name \_\_\_\_\_

Home Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Email Address \_\_\_\_\_

(An E-mail account is mandatory)

What is the best way to reach you during the day? WORK HOME CELL EMAIL

(CIRCLE ALL THAT APPLY)

Are you currently caring for children in a home or center based program? YES NO

What type of care? (CIRCLE ONE)

CHILD CARE PRESCHOOL CHILD CARE INFANT/TODDLER FAMILY/GROUP FAMILY CHILD CARE

EARLY HEAD START HEAD START OTHER \_\_\_\_\_

Program Name \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Work Phone \_\_\_\_\_

What is your highest education completed? \_\_\_\_\_

**\*Required\* - Check all that apply:**

- ☐ I have read and signed the financial statement on the back of this form.
- ☐ I have reviewed the schedule and understand I am expected to be present for each date
- ☐ I have filed for an EIP Award on \_\_\_\_\_ and will follow up on status.
- ☐ I have filed for CSEA/VOICE funding; I am eligible and my CCSI-CDA # is \_\_\_\_\_.
- ☐ My employer (listed above) will be contributing \$\_\_\_\_\_ toward my CDA fee.
- ☐ I agree to set up a payment plan for the balance of my CDA course fees.
- ☐ I would like a call to ask questions or get help applying for financial assistance.

Sign on the **back** and mail this **COMPLETED** Registration Form to:

**Child Care Solutions  
6724 Thompson Road  
Syracuse NY 13211**

## Understanding your Financial and Participation Responsibility

We want to ensure that participants are aware of and accept their responsibilities for this course. **Financial Responsibility:** The CDA Credential and the Scholarships associated with this course are a personal award belonging to the participant; this means that the responsibility to pay is on the student.

**Please read the following statements carefully then sign and date this form.**

I understand that the cost of the CDA course I am enrolling in is \$2,500.00 and that a \$50 Registration fee will be due prior to class start date if my payment method has not been secured. I also understand that any Awards or Scholarships I receive will be applied towards the cost and that I will be responsible for paying any balance.

I understand that if I receive an EIP Award and/or funding through CSEA/VOICE and do not complete the course, I am responsible for all re-payments or balances due.

I understand that if I drop or withdraw from the CDA course prior to the start of the course, that I will receive a 100% refund of my \$50 registration fee.

I understand that if I drop or withdraw from the CDA course after the third session I will receive no refund on my registration fee or for fees paid towards this course. If I feel there are extenuating circumstances that caused me to withdraw from the course, I understand that I may appeal for consideration of a refund by contacting the Executive Director of Child Care Solutions.

I understand that I will receive, and sign off on, a Payment Plan agreement to pay back any balance due not covered by a funding source. In addition, I understand that if payments are not made per my Payment Plan agreement, I may not be allowed to continue in the course, and that I will also not receive credit hours for completion of any CDA classes taken.

I understand that I will not receive a letter of completion until full payment has been made.

\_\_\_\_\_  
Student Name – Please Print

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

### OFFICE USE ONLY:

Date rec. \_\_\_\_\_ Amt \_\_\_\_\_

CHARGE CHECK CASH Rec # \_\_\_\_\_

## CDA Course Schedule (subject to change with notice)

**Date: August 28<sup>th</sup> – December 11<sup>th</sup>**

<b>Course Name:</b>	Fall 2025 CDA Course
<b>Hours:</b>	120
<b>Instructor:</b>	Jean Fetzko
<b># of Sessions:</b>	30
<b>Times:</b>	6:00 - 9:00 pm evenings

### Session Information:

Session #	Method	Day	Date
1	ZOOM	Thursday	8/28
2	ZOOM	Thursday	9/04
3	ZOOM	Monday	9/08
4	ZOOM	Thursday	9/11
5	ZOOM	Monday	9/15
6	ZOOM	Thursday	9/18
7	ZOOM	Monday	9/22
8	In-person	Thursday	9/25
9	In-person	Monday	9/29
10	In-person	Thursday	10/02
11	In-person	Monday	10/06
12	In-person	Thursday	10/09
***13	In-person	<b>Tuesday</b>	<b>10/14</b>
14	In-person	Thursday	10/16
15	In-person	Monday	10/20
<b>MAKE UP</b>	In-person	<b>Tuesday</b>	<b>10/22</b>
16	In-person	Thursday	10/23
17	In-person	Monday	10/27
18	In-person	Thursday	10/30
19	In-person	Monday	11/03
20	In-person	Thursday	11/06
21	In-person	Monday	11/10
22	In-person	Thursday	11/13
23	In-person	Monday	11/17
24	In-person	Thursday	11/20
25	In-person	Monday	11/24
***26	In-person	<b>Tuesday</b>	<b>11/25</b>
27	In-person	Monday	12/01
28	In-person	Thursday	12/04
29	In-person	Monday	12/08
30	In-person	Thursday	12/11
<b>MAKE UP</b>	In-person	<b>Monday</b>	<b>12/15</b>
<b>MAKE UP</b>	In-person	<b>Tuesday</b>	<b>12/16</b>

*Please note, as you may have heard, the agency will be moving to a new location, exact timing will be communicated to participants. The Zoom sessions allow for this transition.*

### (Three Make-Up sessions are included – if needed to use)

Meeting nights are on Mondays and Thursdays, with two being on Tuesdays noted in schedule with \*\*\*.

***Make up dates on the schedule are only attended by those who have missed a class(es) prior to the Make Up dates listed.***

Please note: 90 hours of in-person instruction, plus 30 hours of independent study work will provide the 120 required hours of training needed for the CDA Course.

You must attend all sessions. If you need to be absent, please provide as much notice as possible. All missed classes (up to three) must be made up on the scheduled Make Up dates. If more than three absences, you may be dropped from the course or you will be given credit for attended hours only.