

CDA Scholarships

CDA Scholarships is Georgia's statewide educational assistance program for early childhood educators in pursuit of their Child Development Associate® (CDA) credential. CDA Scholarships assists approved applicants with CDA Training, the CDA® Competency Standards Book, the CDA Application Fee, the CDA Exam Retake, and CDA Renewal Fee. Each of these Scholarships will only be awarded to the applicant once if the applicant is approved.

**Applications can be completed and returned to support@decalscholars.com.
Mailed-in applications will not be accepted.**

Eligibility Requirements

Legal Status

- You're one of the following:
 - United States citizen
 - Legal permanent resident
 - Qualified alien

Employment

- You must have maintained **6 months of continuous employment** in one of the following roles (volunteer work, practicums, and internships do not qualify):
 - Teacher
 - Assistant teacher
 - Floater
 - Director
 - Assistant director
 - Owner
- You must work a minimum of **30 hours per week** if your employer is one of the following:
 - A child care learning center licensed by DECAL or the Department of Defense
 - A family child care learning home licensed by DECAL
 - Before/after school program licensed by DECAL
 - An exempt Georgia Head Start center
 - A Georgia Lottery-funded Pre-K program in a public school



Please note: The eligibility requirements will change on October 1, 2024.

Frequently Asked Questions

Which CDA® trainings qualify for CDA SCHOLARSHIPS? Any 120 clock-hour CDA® training approved through the Georgia Training Approval System listed on the Georgia Professional Development System (www.gapds.decalscholars.com).

Which CDA® trainings qualify for CDA SCHOLARSHIPS renewal? Any 45 clock-hour professional development approved through the Georgia Training Approval System (www.gapds.decalscholars.com).

Where can I find information and sign up for the CDA® Exam, CDA® Renewal, CDA® PD Specialist and Verification Visit, and CDA® Portfolio? Create an account on yourcouncil.org. For questions, please contact the CDA® Council for Professional Recognition at (800) 424-4310 or cdafeedback@cdacouncil.org.

If I have already completed everything and received my CDA® credential, can I be reimbursed for the cost of the training? No, we do not reimburse for the cost of the training if you have already earned your CDA®.

What is POWER-ED and how do I apply? Providing Our Workforce Essential Recognition for Educational Development (POWER-ED) is a program that distributes wage supplements to early childhood educators as they attain higher educational credentials utilizing DECAL Scholars programs. CDA Training Scholarships POWER-ED wage supplements are available for CDA Training Scholarships approved applicants to apply to. Applicants can submit the POWER-ED application (attached to the end of this application) to receive \$1,000 supplements for each 200-hour stage of obtaining their CDA, for up to 3 supplements of \$1,000.

Where can I find a notary public to notarize the "Affidavit for Lawful Presence Verification" on page 6 of this application? A notary can be found at your local bank, post office, public library or courthouse. A notarized affidavit and required documentation must be submitted to the program one time by US Citizens, but Georgia law (O.C.G.A. § 50-36-2) requires all legal permanent residents, qualified alien and non-immigrants to submit a new Affidavit every 12 months.

Application

Select which CDA Scholarships program you wish to apply for in this application using the table below (select only one):

TYPE OF SCHOLARSHIP	ELIGIBILITY	WHEN TO APPLY	AWARD DETAILS
<input type="checkbox"/> CDA® Training and CDA® Competency Standards Book SCHOLARSHIPS Name of DECAL state-approved 120 clock-hour CDA® training instructor: _____	Enrolled in a DECAL state-approved 120 clock-hour CDA® training program. To find a program, visit www.gapds.dec.al.ga.gov .	Apply to DECAL Scholars after you: <ul style="list-style-type: none"> • Sign up with the CDA® training program of your choice • Purchase the CDA® Competency and Standards Book from the CDA® Council 	<ul style="list-style-type: none"> • Up to \$740 paid directly to one DECAL State Approved CDA® Training program • Up to \$35 towards one CDA® Competency Standards Book
 CDA Training Scholarships will cover up to \$500 of the cost of CDA Training after October 1, 2024.			
<input type="checkbox"/> CDA® Exam SCHOLARSHIPS	Completed all of the required steps to obtain the CDA® and signed up for the CDA® Exam.	Apply to DECAL Scholars after you: <ul style="list-style-type: none"> • Complete your 120-hr CDA® Training program (and have your training certificate) • Obtain 480 hours of verified work experience • Prepare your CDA® portfolio • Select your PD specialist from the CDA® Council to conduct the verification visit • Sign up for the exam through the CDA® Council 	Up to \$425 towards one CDA® Exam fee
<input type="checkbox"/> CDA® Exam Retake SCHOLARSHIPS	Took the CDA® Exam once but did not pass. DECAL Scholars SCHOLARSHIPS will only cover one additional attempt for the CDA® Exam.	Apply to DECAL Scholars after you: <ul style="list-style-type: none"> • Take the CDA® Exam once and do not receive a passing score 	Up to \$425 towards one CDA® Exam fee (retake)
<input type="checkbox"/> CDA® Renewal SCHOLARSHIPS CDA® Credential Expiration Date: _____	Obtained CDA® credential 3 years ago and approaching time for renewal. <i>You can only renew in the setting of your original credential and all renewal requirements must be met in that setting, even if you no longer work in that setting.</i>	Apply to DECAL Scholars within 6 months before your CDA® credential expires, after you: <ul style="list-style-type: none"> • Complete your CDA® renewal application with the CDA® Council • Complete 45 clock-hours of professional development 	Up to \$150 towards one CDA® Renewal fee (funds available only for the CDA renewal application, not the professional development hours)

Applicant to Complete this Section:

Name: _____ County of Residence: _____
Full name as it appears on your social security card

Mailing Address: _____
Street address (including apartment number) OR post office box

City: _____ State: _____ Zip: _____

Cell Phone: () _____ E-mail: _____

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Gender:

- Female
- Male
- Non-binary
- I prefer not to answer
- Other: _____

Race:

- White
- Black / African-American
- Asian
- Native American / Alaskan Native
- Native Hawaiian / Pacific Islander
- Bi- / Multi-Racial
- Other: _____

Ethnicity:

- Hispanic/Latino
- Not Hispanic/Latino

Employer/Director to Complete this Section:

Name of Facility: _____
As it appears on license/registration

Facility Address: _____
As it appears on license/registration

City: _____ State: _____ Zip: _____ County: _____

License/Registration Number: _____ Phone: () _____

Facility Type (check one):

- Child Care Learning Center
- Family Child Care Learning Home
- After School Program
- Georgia Lottery-funded Pre-K
- Georgia Head Start Center

Licensed By (check one):

- Georgia Department of Early Care and Learning (DECAL)
- Department of Defense (DOD)

Applicant's Employment Information:

Applicant's Primary Job Title: Floater Assistant Teacher
 Teacher Assistant Director Director Owner

Is the applicant a Georgia lottery-funded Pre-K teacher?

Is the applicant a Head Start or Early Head Start teacher?

Number of hours applicant works each week: _____

Number of months per year applicant works: 9 10 12

Number of months per year applicant is paid: 9 10 12

Applicant's currently hourly wage: \$_____

Applicant is paid: Weekly Bi-Weekly Bi-Monthly Monthly

Applicant's date of hire: ____/____/____
(original hire date if employment is continuous with present employer at different locations)

If applicant is in the classroom, # of children in classroom: _____

Ages of children in classroom:

- Birth-1
- 1-2
- 2-3
- 3-4
- 4-5
- 5-12

Family Child Care Learning Home Owners Only:

Date you opened your facility: ____/____/____

Number of hours your facility operates each week: _____

Number of children currently enrolled: _____

Ages of children currently enrolled:

- Birth-1
- 1
- 2
- 3
- 4
- 5

Net income from previous year's IRS Schedule C tax form: \$_____

Child and Adult Care Food Program (CACFP)?

Serve GACAPS subsidized children?

As Owner, Director, Principal, or Human Resources Manager, I verify that the above employment information for this applicant is true and accurate. I understand and agree that receipt of Scholarships monies by the applicant will not affect any salary adjustments the applicant may be eligible to receive through our program. If the applicant is participating in the Scholarships program, I agree to give the applicant paid leave time to allow the applicant time to attend class, study, and complete classwork.

Name (print): _____ Title (print): _____

Signature: _____ Date: _____

Statement of Affirmation and Frequently Asked Questions

Final Signature

STATEMENT OF AFFIRMATION: Read carefully before signing and dating. Unsigned applications will not be processed.

I _____, (applicant's name), under penalty of perjury, attest that all of the information appearing on this application and in supporting documentation is true to the best of my knowledge. I understand that any false or incomplete information knowingly provided on this application or in supporting documents may be grounds to be denied participation in this program and may prevent me from future participation in any DECAL Scholars programs and other DECAL programs, grants and initiatives. I understand that intentionally providing false information on this application or in supporting documents is a violation of state law and may result in civil or criminal proceedings. I authorize any agent or employee of Georgia Department of Early Care and Learning to verify this information and release it to any necessary party for my consideration in this program. I understand that, if approved and awarded funds, I may receive a 1099 tax form and am required by the IRS to report the income on my tax return. I also understand and agree that my personal information may be shared with the Georgia Professional Development System.

Applicant Signature: _____ Date: _____

Last 4 Digits of Social Security Number: _____

Georgia PDS Information

All individuals applying for DECAL Scholars programs must register with the Georgia Professional Development System for Early Childhood Educators (GaPDS) as a part of the application process.

The GaPDS is separate from DECAL Scholars. It records and maintains your professional development information – your training and/or any credentials or degrees you earn, in one convenient location. Registering is easy! You can sign up immediately, even if you have not earned a credential or degree, by entering any recent early childhood or related training you have received.

1. Gather your relevant training certificates, credentials, and/or transcript(s).
2. Go to www.gapds.dec.al.ga.gov. Click the Login/Register button and click **Create new account for GaPDS**.
4. Select **I want to create and manage my Georgia Professional Development System Account** and click Continue.
5. Follow the directions, including selecting your employer, to create your confidential account. Be sure to record your username and password and secure them for future use. Follow the instructions in the confirmation email to complete your account.
6. Fill out the information and steps on each tab completely and accurately, to the best of your ability.
7. Click the **Profile** link in the Reports box on the left side of the screen, print your GaPDS profile and submit with your DECAL Scholars Scholarships application. Your GaPDS profile must reflect your name, your GaPDS number, the name of your current employer, and a Pending or Active status.

You can update your profile at any time by submitting documentation of state-approved trainings, credentials, degrees, conference attendance, etc. as you complete them.

If you have questions or need technical support, contact the GaPDS by phone at 404-334-6461 or email at gapds@dec.al.ga.gov.

DECAL Scholars Contact Information

Phone: (770) 642-6722

Email: support@decalscholars.com

Website: www.decalscholars.com

Attach the following documents to your application:

CDA Training and Book

- Invoice from trainer outlining the cost of CDA® training, name of applicant, and who is to be paid (applicant, business, or trainer). Have the trainer sign and date the invoice if possible.
- Copy of CDA® Competency Standards Book receipt (if applicable; must be submitted within 30 days of purchase).
- Copy of the FRONT and BACK of a secure and verifiable document (see page 7 for information).
- Copy of two recent pay stubs reflecting your name, the name of your employer, and your gross (before deductions) wages. Family child care learning home providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income.
- Copy of your Georgia Professional Development System profile reflecting your GaPDS number, the name of your current employer, and a "Pending" or "Active" status (see page 4 for more information).

CDA Application Fee

- Copy of certificate or academic transcript documenting 120 clock-hours of CDA® training.
- Copy of your Georgia Professional Development System profile reflecting your GaPDS number, the name of your current employer, and a "Pending" or "Active" status (see page 4 for more information).
- Copy of the FRONT and BACK of a secure and verifiable document (see page 7 for information).
- Copy of two recent pay stubs reflecting your name, the name of your employer, and your gross (before deductions) wages. Family child care learning home providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income.
- Copy of YourCouncil (CDA® Council) CDA® Profile page reflecting your customer ID number.

CDA Renewal Fee

- Copy of 45 clock-hours of professional development.
- Copy of your Georgia Professional Development System profile reflecting your GaPDS number, the name of your current employer, and a "Pending" or "Active" status (see page 4 for more information).
- Copy of non-expired CDA® credential (CDA® credential must be within 6 months of expiration date and not expired).
- Copy of the FRONT and BACK of a secure and verifiable document (see page 7 for information).
- Copy of two recent pay stubs reflecting your name, the name of your employer, and your gross (before deductions) wages. Family child care learning home providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income.
- Copy of YourCouncil (CDA® Council) CDA® Profile page reflecting your customer ID number.

CDA Exam Retake Fee

Only open to prior recipients of the DECAL Scholars CDA Exam Fee SCHOLARSHIP.

- Copy of your CDA® Exam results from your first attempt.
- Copy of two recent pay stubs reflecting your name, the name of your employer, and your gross (before deductions) wages. Family child care learning home providers and owners who do not pay themselves W2 wages submit a copy of last year's Schedule C or other federal tax form documenting net business income.

Affidavit For Lawful Presence Verification For DECAL Scholars Programs

By executing this affidavit under oath, as an applicant for a DECAL Scholars program payment or for other public benefit as referenced in O.C.G.A. §50-36-1(a)(3)(A), I hereby swear and affirm that the following is true and correct with respect to my application for a DECAL Scholars payment from Bright from the Start: Georgia Department of Early Care and Learning.

Name of Person Receiving Benefit: _____

Section 1: Status

Check only ONE of the following:

- I am a United States citizen 18 years of age or older.
- I am a legal permanent resident of the United States, 18 years of age or older. *(You must submit a copy of the FRONT and BACK of your Legal Permanent Resident card).*
- I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older, with an alien registration number issued by the Department of Homeland Security or other federal immigration agency. *(You must submit a copy of the FRONT and BACK of your Alien Registration Receipt card OR your Employment Authorization card).*

My alien registration number issued by the Department of Homeland Security or other federal immigration agency is:

Section 2: Documentation

- I verify I am providing A COPY OF THE FRONT AND BACK of at least one secure and verifiable document, as required by O.C.G.A. Sec. 50-36-1(e)(1), with this affidavit. **A complete list of acceptable documents is on page 7 of this document.**

The secure and verifiable document I am providing with this affidavit is:

(Identify the document, such as driver's license, birth certificate if last name is still the same, permanent resident card, etc.)

Section 3: Applicant Signature

In providing the above information under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit in any matter within the jurisdiction of any department or agency of state government shall be guilty of a violation of O.C.G.A. §16-10-20 and face criminal penalties as allowed by such criminal statute.

Do not sign and date this document until you are in the presence of a notary.

Applicant Signature: _____ Date: _____

Printed Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Section 4: Notary Signature

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ____ DAY OF _____, 20__

Notary Public Signature: _____

My Commission Expires: ____/____/____

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2

Issued February 20, 2018, by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”), as amended by Senate Bill 160, signed into law as Act No. 27, (2013), provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(g). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- **An unexpired United States passport or passport card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired United States military identification card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired driver’s license** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]¹
- **An unexpired identification card** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired tribal identification card of a federally recognized Native American tribe**, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be accessed at: <https://bia.gov> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired United States Permanent Resident Card or Alien Registration Receipt Card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired Employment Authorization Document** that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired passport issued by a foreign government**, provided that such passport is accompanied by a United States Department of Homeland Security (“DHS”) Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual’s lawful immigration status or other proof of lawful presence under federal immigration law² [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired Merchant Mariner Document or Merchant Mariner Credential** issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **An unexpired Free and Secure Trade (FAST) card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- **An unexpired NEXUS card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- **An unexpired Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- **An unexpired driver’s license** issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- **A Certificate of Citizenship** issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **A Certificate of Naturalization** issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **Certification of Report of Birth** issued by the United States Department of State (Form DS-1350) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **Certification of Birth Abroad** issued by the United States Department of State (Form FS-545) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **Consular Report of Birth Abroad** issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- **An original or certified copy of a birth certificate** issued by a State, county, municipal authority, or territory of the United States bearing an official seal [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]

