

# Application for CACFP Professional Certification

**Verify Requirements:** Please make sure to check the box with the certification type and experience category for which you qualify and are applying for. If applying for both, requirements must be met for each certification separately.

## CACFP Child Nutrition Professional (CCNP) \$75.00



CCNP is the professional certification for the home child care provider or staff employed at a center operating CACFP, and/or a CACFP agency (Sponsor, Head Start, State Agency, etc.) administering CACFP.

- 3 years experience  
(16) Specialty 1  
(16) Specialty 1-2 or Specialty 3

- 1 year experience  
(16) Specialty 1  
*with degree*

- 1 year experience  
(12) Specialty 1  
(4) Specialty 2 or Specialty 3  
*with degree*

## CACFP Management Professional (CMP) \$175.00



CMP Certification is for the CACFP administrator that has a minimum of 5 years of experience with at least 3 of those years being CACFP administration experience at a CACFP Agency (Sponsor, Center, State Agency, Head Start, etc.).

- 8 years experience  
(4) Specialty 1 or 2  
(4) Specialty 5 or 6  
(8) Specialty 4 or 7

- 5 year experience  
(4) Specialty 1 or 2  
(4) Specialty 5 or 6  
(8) Specialty 4 or 7  
*with degree*

- 5 year experience  
(12) Specialty 1 or 2  
(12) Specialty 5 or 6  
(12) Specialty 4 or 7  
(24) Specialties 1-7

CCNP \$75.00

CMP \$175.00

CCNP & CMP \$250.00

### Applicant:

Name \_\_\_\_\_

Job Title \_\_\_\_\_

Agency \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

**Payment:**  Check # \_\_\_\_\_

Visa  MasterCard  AMEX  Discover

Credit Card # \_\_\_\_\_

Cardholder \_\_\_\_\_

Exp. Date \_\_\_\_\_ Security Number \_\_\_\_\_

Signature \_\_\_\_\_

Make checks payable to National CACFP Sponsors Association and remit payment to:  
National CACFP Sponsors Association, PO Box 1748, Round Rock, TX 78680

### Applicant Statement:

I affirm that all the information I have provided is true to the best of my knowledge and I understand that National CACFP Sponsors Association has the right to verify any information in regards to my certificate. If I fail to provide true information or abide by the rules of certification by National CACFP Sponsors Association, my application will be denied.

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Note: Please allow 4-6 weeks for your application to be processed. The application fee is non-refundable. If your application is incomplete, you will receive an email listing additional documentation needed to earn your Certificate and you will have 30 days to submit those needed documents to NCA. If NCA receives your documents after the 30-day period, you will need to resubmit the entire application and pay the application fee again.*



Visit [cacfp.org/certification](http://cacfp.org/certification) to apply online.

**Share Your Success!** The Certification is a special designation for those in the CACFP profession. We value you as a member of this program and would like to share your success. Please provide your supervisor, state agency, and newspaper information.

Supervisor \_\_\_\_\_

Email \_\_\_\_\_

State Agency \_\_\_\_\_

Email \_\_\_\_\_

Newspaper \_\_\_\_\_

Email \_\_\_\_\_

