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| --- |
| *DCYF Use Only* |
| DCYF Approval: Approved [ ]  Denied [ ]  |
| Meets RCW Requirement (If No, state RCW#):      Yes [ ]  No [ ]  |
| Meets WAC Requirement (If No, state WAC#):      Yes [ ]  No [ ]  |

**ECEAP Contractor Waiver-Variance Request to ECEAP Requirements**

*Contractor must get prior approval by DCYF ECEAP before implementing the waiver or variance*.

**Complete form and email to** **dcyf.eceap@dcyf.wa.gov**

Request Date:       Early ECEAP [ ]  ECEAP [ ]  ECLIPSE [ ]

Contractor Name:

Subcontractor Name:       NA [ ]

Proposed start date:       Requested duration / end date:

Site Name, if applicable:

Class, if applicable:

Slot type: [ ]  Part Day [ ]  School Day [ ]  Working Day [ ]  Early ECEAP

**Standard Number, title, and subsection:**

[ ]  Waiver: Unable to meet the standard due to specific needs of the program or enrolled child.

[ ]  Variance: Meet the regulation in an alternative way than described due to specific needs of the program or enrolled child.

Explanation of the waiver/variance:

Reason for waiver/variance:

Impact on services to children and families:

Description of how contractor will meet the intent of the ECEAP provision or standard:

Additional DCYF ECEAP comments:

DCYF ECEAP Program Manager Signature: Date

DCYF ECEAP Administrator Signature: Date