



Commonwealth of the Northern Mariana Islands
Department of Community and Cultural Affairs

CHILD CARE LICENSING PROGRAM

Tel: (670) 488-1343

Petition for Appeal of Ineligibility Determination

Completion of this form is required as part of a written request to appeal an ineligibility determination by the Child Care Licensing Program (“CCLP”).

Instructions: In order to appeal an ineligibility determination by CCLP, you must complete this form and include copies of any documents or other materials that support your position regarding the disputed information. Submit the completed appeal form and any supporting documents to the Department of Community and Cultural Affairs Child Care Licensing Program at the addresses found in Section D of this form **within ten days after receiving the Notice of Ineligibility letter from CCLP. The appellant can request for an extension for a specific amount of time prior to the expiration of the ten days appeal period. However, a request for an extension may be granted only upon good cause shown by the appellant.**

A. INDIVIDUAL REQUESTING APPEAL	
Name (Last, First, Middle)	Tel./Cell Number
Mailing Address	
Email Address	
B. INELIGIBILITY DETERMINATION INFORMATION	
1. Date of Notice of Ineligibility issued by the Child Care Licensing Program	
2. List the information from the Notice of Ineligibility that you wish to challenge as inaccurate:	

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C. ATTESTATION

I affirm that all statements made on this form and any attachments are true and correct to the best of my knowledge.

SIGNATURE – Appellant/Individual Requesting Appeal	Date Signed

D. SUBMITTAL

Submit this appeal request form and copies of any documents or other materials you deem relevant to the Department of Community and Cultural Affairs Child Care Licensing Program **within ten days of the date of receipt of the Notice of Ineligibility letter.**

U.S. Postal Service

DCCA Office of the Secretary
ATTENTION: Child Care Licensing Program
Caller Box 10007
Saipan, MP 96950

Email

gsalas.cclp@childcare.gov.mp