

THE COMMONWEALTH OF MASSACHUSETTS
Department of Early Education and Care

Dear Provider:

Thank you for your inquiry regarding obtaining a variance from EEC regulations. Please complete this form and attach any additional information and return to your licensor. In order to receive a variance, you must submit clear evidence, to the satisfaction of the Department, that your variance proposal meets the spirit and intent of EEC regulations. Please note:

1. The Variance requested must be adequate to protect the health and safety of children.
2. The Variance requested must not contradict other applicable regulations.
3. The maximum amount of time for which a variance will be granted is the duration of the licensing period.
4. The Variance is not transferable to another licensee or another location.

1. Licensee: _____

Program Name: _____

Address: _____

Mailing Address: _____

Phone: _____ Email: _____

2. Identify the regulation, by number and title, for which a variance is being requested:

102 CMR _____

Describe your understanding of the regulation and the intent of the regulation:

See reference at 102 CMR 3.03(3), 5.03(6), 7.03(6), 8.03(10)

3. Describe your alternative method of compliance. Be specific, explaining how your method meets the regulation. Attach any supportive material that you feel will help with your explanation, including diagrams, photographs, policies, forms, expert opinions, etc.

Signature of Applicant: _____ **Date:** _____

A Variance is granted only for the duration of the current license. A variance is granted based upon the facts and procedures submitted by the applicant/program in the variance request. Any significant change in the facts or procedures upon which the variance was granted may terminate the variance. Re-application must be made at the time of license renewal or if changes occur in the facts or procedures upon which the variance was granted.

(for completion by EEC ONLY)

Facility # _____

In Process: Application [] Renewal [] Request during term of license []

Licensors's Recommendation: Grant [] Deny []

Rationale: State the basis for your recommendation.

Regulation # _____

Regulation Heading: _____

Brief explanation to appear on the license: _____
