



UNAR Guidance for Licensing Variance Applications- Expired CNA's

The Department of Health is willing to consider requests from formerly certified individuals who are more than 6 months expired to reinstate their certification without repeating a training program or state testing.

What does this mean? This means if you were CNA in the State of Utah in the past, and in good standing with UNAR when you expired, you may be granted certification without needing to take another training program or the state exam.

If your name has changed since you were certified, fill out UNAR's **Name Change Application** which can be found here <http://utahcna.com/docs/Name%20Change%20and%20Name%20Correction%20Application.pdf> prior to submitting your *Licensing Variance Application*.

How do you request to have your certification reinstated? You must complete a *Licensing Variance Application* and submit it to the Utah Department of Health, seeking their response.

The *Licensing Variance Application* is not an ideal document for this purpose, but we will make the best use of it we can.

- This is a fillable form, but it does not allow you to save the data that you enter.
- Once you type in the information, you will need to print it.
- You can then save it electronically by scanning the printed pages and saving it as a pdf file.
- You will then send an email with the subject line **Expired CNA Variance Request** and include your completed Variance Application as a pdf attachment to donelle.ricketts@davistech.edu.

Directions for filling out the Variance.

The variance can be found here <http://health.utah.gov/hflcra/forms/Variance.pdf>

Leave all boxes that are not specifically mentioned below blank.

Identifying Information: Use your name where it asks for the name of the facility along with your address and best contact phone number.

Variance Information: The state rule is R432.45-7. Start of Variance request should be the date you are filling out the form. Enter your name as the individual for whom the variance is requested. Leave other boxes blank.

Facts Forming Basis for Variance:

In the first text box tell us-

- That you were formerly a CNA and that you want to reinstate your certification, include the approximate date range you were certified as a nursing assistant in the State of Utah

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- what your current job title is and your employer
- if unemployed, what was your most recent job title and employer
- what you plan to do with your certification if your Variance Request is accepted
- Your email address, date of birth, and previous certification number- if known