



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

PHONE: (717) 783-3670
FAX: (717) 783-5662

Mr. Ben Dourte, Administrator
Elwn, Inc.
Hartman House
111 Elwyn Road
Elwyn, Pennsylvania 19063

JAN 24 2011

RE: Elwyn-Spring Haven

Dear Mr. Dourte:

Thank you for your request for a waiver of 55 Pa.Code Ch. 2600 (relating to personal care homes). You have requested a waiver of 55 Pa.Code § 2600.54(a) (relating to qualifications for direct care staff persons) for [REDACTED]

Your request for waiver is being returned for additional information. Each waiver request must include documentation that the non-U.S. educational program is similar to or exceeds U.S. educational requirements. This includes, at a minimum, a transcript which lists the specific courses taken to earn the diploma (including dates of completion) and the date the individual earned the diploma. The transcript needs to show at least three years of schooling information. Transcript must be translated into English by a certified English translator. A copy of the transcript that was sent to Josef Silny & Associates, Inc. must also be submitted to the Department. Please submit a clear and legible version of [REDACTED] transcript.

If you have any questions regarding the waiver process, please contact Ms. Tara Pride, Director of Policy, at telephone number (717) 783-3670.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Melusky'.

Ronald Melusky
Acting Director