

DEPARTMENT of COMMUNITY and CULTURAL AFFAIRS CHILD CARE LICENSING PROGRAM & CHILD CARE and DEVELOPMENT FUND PROGRAM Ascension Ct. Bldg.# 1343 & Bldg.# 1347, Caller Box 10007 Capitol Hill, Saipan 96950 Tel. No.: 664-2572 Fax No.: 664-2547



# **CHILD CARE CERTIFICATE APPLICATION**

Type of Application:	() INITIAL	() RENEWA	L ()	EXTENSION	() NEW SITE
Type of Services:	() Family Home Care () Infant/Toddler Care		<ul><li>( ) Group Home Care</li><li>( ) Before/After Sch. Prog</li></ul>		( ) Center Base m
Classification:	() Day Care	( ) Nig	ht Care	() In-Home Care – the childcare servic is at the child's home.	

### A. APPLICANT INFORMATION:

Business Name:	Physical Address (Street Name, Village, Island):
TIN/Tax ID No.:	Tel. (Landline) No.
Mailing Address:	Email Address:
Primary Contact Person (Preferably Director/Principal):	Position:
2nd Contact Person:	Position:

#### **B. SERVICES INFORMATION:**

OCCUPANTS (DPW Approved):	ENROLLMENT:	AGES (Youngest to Oldest)			
No. of STAFF:	No. of New Staff:	No. of New Staff Accomplished Pre-Service Training:			

# C. LIST of STAFF COMPLETING PRE-SERVICE TRAINING:

#	Legal Name (Surname, First Name, Middle Initial)	Approval Date	Date to Complete (90 Calendar Days)	Status
1				
2				
3				
4				
5				

## **D. STAFF INFORMATION:**

#	<b>Legal Name</b> (Surname, First Name, Middle Initial)	Date of Birth	Age	Approval Date	Assigned Position	Accrued T& T/A Hrs.

Note: Attached additional listing with the same information as stated in the columns, if necessary.

#### E. REQUIRED DOCUMENTS (Attach all listed documents with the application):

() Map to the Center/School (for new applicant or site)

() Updated Orientation Certificate

#### F. ACKNOWLEDGEMENT:

Upon the approval of this application, I pledge to comply with all local and federal statutory rules and regulations governing the Child Care and Development Fund (CCDF) Program.

I am aware that all listed staff must be 18 or above years old.

I am aware that all listed staff must have no criminal convictions, no child abuse and neglect records, and no physical or psychological problem that may adversely interfere or affect in providing childcare services.

I am aware that all listed staff will be screened and must be cleared for the Sexual Offenders Registry Notification Act (SORNA).

I am aware that by signing this application is also a consensus that all listed staff are to be screen for (FBI) finger print check for clearance of any criminal history that jeopardizes the enrolled children.

I am aware that CCDF will not compensate childcare services performed prior to the approval of this application.

Page 2 of 3 Updated: March 18, 2021 I am aware that the parents have unlimited access to their enrolled child(ren) and the child(ren) written records during operational hours and whenever the children are in my care.

I am aware that I must conduct a developmental screening and daily health check for all enrolled children.

I am aware that as a condition to receive federal funds, my business is subject to announced/unannounced monitoring, and to submit to a preliminary/renewal inspection by the Child Care staff.

I am aware that in order to continue to receive federal funds, all listed staff must accumulate 30 hours of training and/or technical assistance annually.

I am aware that a new staff approved by Child Care Licensing Program (CCLP) must complete the Pre-service Training topics within 90 days from the date of approval.

I am aware to update the CCLP with all staffs' and facility's required documents 30 calendar days prior to the expiration date.

I am aware that childcare services reimbursement will be cease if there should be lapse of dates in any of staffs' or facility's required documents.

I am aware that I must update the CCLP with a valid medical document that would clear all listed staff with tuberculosis.

I am aware that my facility must be equipped with a working telephone landline specifically used for childcare service.

I am aware that smoke alarms must be properly installed in all enclosed rooms within the center/school.

I am aware that the Child Care (C.C.) Certificate is valid for one year and renewal application with the required documents must be submitted to CCLP 60 calendar days prior to the expiration of my current C.C. certificate.

I am aware that upon the approval of this application, the C.C. staff will inspect the center/school to ensure that the facility complies with the local and federal requirements for health, fire and building codes as well as meets the Child Care Programs requirements.

With my signature below, I acknowledged that I have read and understood the obligations I must observe and fulfill as a certified childcare provider.

Printed Legal Name (Preferably Primary Contact Person)

Signature

Date