

**Family Child Care Homes & Large Child Care Homes Monitoring Checklist**

Program Name	License Number	Subtype	Visit Type	Purpose of Visit	Visit Date	Visit Time
--------------	----------------	---------	------------	------------------	------------	------------

**Children present:**

0-11 Months	12-23 Months	2 years old	3 years old	4-5 years old	6 years & older
-------------	--------------	-------------	-------------	---------------	-----------------

Total children on-site	Personnel with children	Total children off-site	Personnel with children off-site
------------------------	-------------------------	-------------------------	----------------------------------

Children engaged in the following activities:

All items listed below are compliant unless marked as "NC" Non-compliant or "NR" Not Reviewed			
Item	Requirement descriptions	NC	NR
01	Purpose and policy of the law		
02	Necessity and issuance of license		
03	Ages and number of children		
04	Requirements for caregivers		
05	Home Environment		
06	Emergency Preparedness		
07	Transportation		
08	Records		

## Family Child Care Homes & Large Child Care Homes Monitoring Checklist

Program Name	License Number	Subtype	Visit Type	Purpose of Visit	Visit Date	Visit Time
--------------	----------------	---------	------------	------------------	------------	------------

All items listed below are compliant unless marked as "NC" Non-compliant or "NR" Not Reviewed

Item	Requirement descriptions	NC	NR
09	Parent communication		
10	Child health		
11	Daily routine and equipment		
12	Rest time		
13	Behavior and guidance		
14	Infants, toddlers, and two-year-olds		
15	Food and nutrition		
16	Fire safety		
17	Requirements for large family child care homes		

**Weapons Declaration:**

Fire Drill Date:		Water Testing due dates	
Tornado Drill Date:		Lead:	
Smoke Detector Test Date:		Bacteria:	
Carbon Monoxide Test Date:		Nitrates:	
Fire Extinguisher Expiration Date:		Annual Insurance expiration OR Exception Declared date:	

Family Child Care Homes & Large Child Care Homes Monitoring Checklist

Program Name	License Number	Subtype	Visit Type	Purpose of Visit	Visit Date	Visit Time

Pet Name	Pet Vaccination Expiration Date

Auto Make	Auto Model	Year	Insurance Expiration

**Family Child Care Homes & Large Child Care Homes Monitoring Checklist**

Program Name	License Number	Subtype	Visit Type	Purpose of Visit	Visit Date	Visit Time

Individual with Driver Safety Professional Development	Date Completed	Individual with CPR/First Aid	Date expires

Large FCCH Primary Caregiver Qualifications	Credential	Expiration, if applicable

**Program Days and Hours of Operation:**

Days of Operation	Hours of Operation

