



STATE OF WASHINGTON
DEPARTMENT OF EARLY LEARNING
P.O. Box 40970, Olympia, WA 98504-0970

Dear Potential Child Care Applicant,

Thank you for your interest in opening a family home child care business. Providing child care is very important work because you must keep children safe, healthy, and learning. There are often many decisions to make as you begin applying for this job. You may be required to make changes to your home and routines in order to be licensed.

Filling out this survey is the first step to help you decide if this is the best choice for you and your family at this time. If you have questions after filling out the survey, please call your local DEL office to speak to a home licensor.

If you decide that you still want to apply for a child care license after answering the questions on the back of this letter, you will need to register for orientation. Orientation will give you information about the licensing process. Orientation is offered by the local office on a regular basis. To register, please first complete this survey and send it to:

Department of Early Learning
You can find your local office online:
www.del.wa.gov/about/contact.aspx

You may not be registered for the next available family home child care orientation until this survey is received. If the class is already full, we will register you for the next available class. We will call to let you know that you are registered for this class.

Thank you.

Department of Early Learning Licensing Staff

Family Home Child Care Orientation Survey

Name:	
Phone number:	E-mail address:
City:	Zip code:

1	Do you have an outdoor play area at your residence that is already fenced (at least 4 ft. in height, unless you have an outdoor hazard such as a lake, stream, etc, then a taller fence may be required) or that you are willing and able to fence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Do you have the financial ability to pay for the start-up costs of opening a home childcare business (fire extinguisher, smoke detectors, toys, fees, necessary home modifications, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Have you gained approval from your landlord, neighborhood/housing association, and/or city/county ordinances and codes to run a business in your home?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	As a new provider, you may be restricted to no more than 6 children (including your own children 11 years and under) for at least the first year. It can also take up to 90 days to obtain a license to open your family home child care business. Have you considered these factors in your business plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Are your household members supportive of your decision to provide child care?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	The public will have access to your child care licensing file kept by the State of Washington. Are you willing to make your business open to public disclosure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Do you live in an apartment above the ground floor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8	Do you or any of your household members have a pending or past criminal history that would disqualify you from child care? (See list at: http://apps.leg.wa.gov/WAC/default.aspx?cite=170-06-0120)	<input type="checkbox"/> Yes <input type="checkbox"/> No
9	Have you or any of your household members ever had a “substantiated” or “founded” allegation of child abuse or neglect issued by Child Protective Services (CPS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10	Have you or any of your household members ever had a license revoked or suspended from any other regulatory agency (for example, a foster care license)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered no to any of the questions 1-6, a family home child care business is likely not a good fit for you at this time.

If you answered yes to any of questions 7-10, a family home child care business is likely not a good fit for you at this time.

Signature _____

Date _____