#  Municipality of Anchorage

**Office Use Only**

# Child Care Licensing Program

# REPORT OF CHANGE

Child care licensing regulations requires you to report to the Department any changes to your child care facility.

Name of Facility:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Effective Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Immediately report to Child Care Licensing (within 24 hours):

[ ]  Knowledge of a conviction or indictment, presentment, or charging by information or complaint, of an administrator, regular volunteer, staff person, or member of the licensee’s household for a violation of the laws or the laws of another jurisdiction with similar elements as described in AS 47.32, 7 AAC 10.1000 – 7 AAC 10.1095

[ ]  Any unplanned change in the management and /or operations of the facility.

30 Days Notice to Child Care Licensing prior to change in the: *Indicate the changes below.*

[ ]  Person operating facility. Name of person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Name of facility. Name of facility:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Administrator. Name of new Administrator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Submit an *Administrator Designation and Qualification Form CC56* and four (4) *Child Care Facility – Administrator Reference* CC57 forms)

[ ]  Child Care Associate. (Centers only): Name of CCA:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Submit a *Child Care Associate Designation And Qualification Form* CC58)

[ ]  Name change of person operating facility. New Name of person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Addition or deletion of a specialization. Adding / Deleting (circle one) Specialization(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Submit a *Request for* *Specialized Program Activity* CC54 *or Request for Nighttime Care Specialization* CC53)

[ ] Age range of children served. New Age range:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_through\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Number of children in care authorized by the facility’s license. Desired Capacity:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Submit a *Child Care* *Facility Staffing Plan* CC71)

[ ] Location (Submit an *Application for Provisional Child Care License*).

 New physical address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Days/Hours of operation (Submit a *Facility Schedule Reporting Form* CC92).

 New Days/Hours of operation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (If between the hours of 10:00pm and 6:00am, submit a *Request for Nighttime Care Specialization* CC53)

[ ] Governing Body (Submit a *Governing Body Information* CC55 form)

[ ] Indoor floor plan or outdoor space diagram

[ ] Business Type (Submit documentation proof of business change, and new business license).

[ ] Change in the plan of operation or other policies. Describe summary of changes below:

**NOTE:** Changes to the items listed above may require the facility to submit additional forms and/or supplemental or updated information, as applicable, including but not limited to: Plan of Operation; Facility policies; *Permission to Operate a Child Care Business* CC72; Get Out Alive! Evacuation Plan CC67; *Plan for Shared Use of a Child Care Facility* CC73; *Plant Safety Plan* CC93; State, Municipal, or Borough Business License(s); and any other relevant documentation related to the change requested.

20 Days Notice to Child Care Licensing prior to the: Indicate the changes below*.*

[ ]  Decision to relinquish license.

 Effective date of closure:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Reason for closure:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14 Days Notice to Child Care Licensing after the: Indicate the changes below*.*

[ ]  Addition of a household member residing in the facility. Effective date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of individual household member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: (individual 16 years or older must obtain a background check prior to residing in the facility)

Relationship to Facility:

 [ ]  Child under 18yrs old [ ]  Foster Child [ ]  Household Member (over 18yrs old)

 [ ]  Spouse / Partner [ ]  Owner / Operator [ ]  Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Permanent departure of a household member from residing in the facility. Effective date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of individual household member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Facility:

 [ ]  Child under 18yrs old [ ]  Foster Child [ ]  Household Member (over 18yrs old)

 [ ]  Spouse / Partner [ ]  Owner / Operator [ ]  Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Change in mailing address. New Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# 1 Day Notice to Child Care Licensing after the:

[ ]  Signing of a contract for the sale of the facility.

# Other Change(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Effective Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Attach the applicable form(s) and/or any supporting documentation for this reported change.

# Name and position of person completing this form:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Position

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date