



HOME DAYCARE PROVIDER APPLICATION

	Date:
Contact Information:	
Name:	Telephone #:
Address:	City/Town:
Postal Code:	Number of Years at Address:
Type of Home (Apt., Townhouse, etc.):	Rent or Own Home:
Previous Address if less than 5 years:	
Email:	
Personal Information:	
Languages Spoken:	Date of Birth:
Do you have a driver's license?	
Auto Insurance Company:	Liability coverage:
	Spouse/Partner's Name:
Number of Children in Home:	Does anyone else live in your home?
Birthdates of Children in Home:	
Do you or anyone in your home smoke?	
Type of Pets in home:	Are the vaccinations up to date?
Do you (or anyone in your household) have a criminal record?	
If yes, please give details:	
Background Information:	
List any previous daycare experience:	
List any childcare courses taken:	
Have you completed a First-Aid or CPR course?	If so, when?
Are you currently providing daycare or registered with an agency?	
If you are presently caring for any daycare children, give names and ages:	
Name:	Age:
Name:	Age:
Home Environment:	
Does your home have a basement apartment with tenants?	



Has your home been child-proofed?		
List the areas of your home that will be available to children:		
Please list any equipment that you may have available to use (toys, crib, playpen, high chair, stroller, etc.):		
Are the outdoor areas of your property fenced?	If not, will they be?	
Do you have a pool?		
Questionnaire:		
Are you interested in full time or part time?	Which days and hours?	
Do you have an age group preference?	If so, which ages?	
Do you plan on using a car to transport children?		
How did you hear about Hopscotch?		
References		
Are you willing to have fire, health and police checks?		
Please provide two references that are unrelated to you and not living with you (preferably one being work-related):		
Name:	Daytime Tel:	Relationship:
Name:	Daytime Tel:	Relationship:

I certify that the information I have supplied on this application is correct, and agree that Hopscotch Home Daycare Agency may further investigate or verify this information and contact the references listed above in connection with my proposed relationship with the agency.

Applicant's Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Date received:	Date called:
Date of interview:	Available space & ages:
Date of Safety Check:	