

# MARYLAND STATE DEPARTMENT OF EDUCATION

Office of Child Care-Licensing Office

## ON CALL AGREEMENT

### Child Care Centers and Large Family Child Care Homes

Child Care Center and Large Family Child Care Regulations state, "If the only children in attendance at the center are 2 years old or older and only one staff member is needed to meet staff/child ratio requirements, the operator shall have a written, signed, and dated agreement from an adult who has successfully passed a federal and State criminal background check and a review of child abuse and neglect records and is willing and able to be at the center within 15 minutes of notification."

**Name of On Call Adult:** \_\_\_\_\_

(First, Middle, Maiden, and Last)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Center Operator's Name:** \_\_\_\_\_

Center Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

	YES	NO
I understand that I must submit criminal background check forms to CJIS and a notarized release of information form to OCC.	<input type="checkbox"/>	<input type="checkbox"/>
I understand that I cannot be used as an on-call on call adult until OCC Licensing Office completes the required clearances for my approval and I have successfully passed a federal and State criminal background check.	<input type="checkbox"/>	<input type="checkbox"/>
I will be on-call at the center named above during the center's operating hours. I understand this means I am available to supervise the children in the event of an emergency.	<input type="checkbox"/>	<input type="checkbox"/>
I am at least 18 years of age and physically and mentally capable of providing care for children.	<input type="checkbox"/>	<input type="checkbox"/>
<b>For Child Care Center:</b> I have read the center child care regulations and agree to follow them. (See below link for the Center Child Care regulations. <a href="http://www.marylandpublicschools.org/NR/rdonlyres/FF4D42D2-46A0-44E6-9CEC-546C5641F978/31469/Sub16CTRamend012312.pdf">http://www.marylandpublicschools.org/NR/rdonlyres/FF4D42D2-46A0-44E6-9CEC-546C5641F978/31469/Sub16CTRamend012312.pdf</a>	<input type="checkbox"/>	<input type="checkbox"/>
<b>For Large Family Child Care Homes:</b> I have read the large family child care homes regulations and agree to follow them. (See below link for the Center Child Care regulations. <a href="http://www.marylandpublicschools.org/NR/rdonlyres/FF4D42D2-46A0-44E6-9CEC-546C5641F978/31464/13A18_LFCCH_eff020612.pdf">http://www.marylandpublicschools.org/NR/rdonlyres/FF4D42D2-46A0-44E6-9CEC-546C5641F978/31464/13A18_LFCCH_eff020612.pdf</a>	<input type="checkbox"/>	<input type="checkbox"/>
Have successfully completed a Federal and State criminal background checks.	<input type="checkbox"/>	<input type="checkbox"/>

**If this agreement should change, I will provide written notification to the Child Care Center Director and the Office of Child Care immediately. The OCC Licensing Specialist Number is:** \_\_\_\_\_

I certify that the information on the form is correct and true.

\_\_\_\_\_  
On-Call Adult/Substitute (Printed name)

\_\_\_\_\_  
Center Director (printed name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Date)