

NAME:		
ADDRESS:		
PHONE NUMBI	ER:	· · · · · · · · · · · · · · · · · · ·
POSITION:		
SIGNATURE:		
Please answer the	e following questions:	
		ase with the Department of cred to provide child care in your
	Yes	No
subject of d	lisciplinary action, or have	ram, have you ever been the been part responsible for a child ve fine or other disciplinary
	Yes	No
If yes, please exp	olain:	