|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Facility Name:** | **Name:** | | **Name:** | | **Name:** | | **Name:** | |
| **PCID:** | (Circle One)  Operator  Staff person  Volunteer  Household Member | | (Circle One)  Operator  Staff person  Volunteer  Household Member | | (Circle One)  Operator  Staff person  Volunteer  Household Member | | (Circle One)  Operator  Staff person  Volunteer  Household Member | |
| **Provisional Hire Waiver: Y or N Date:** |
| **Inspection Date:** | Work Hours: | | Work Hours: | | Work Hours: | | Work Hours: | |
| **Certification Representative:** |  | | | | | | | |
| **Required Information**: §3290.32 | | | | | | | | |
| Date of Hire / First day caring for children |  |  |  |  |  |  |  |  |
| Employee address in record §3290.192(1) | Y N | | Y N | | Y N | | Y N | |
| Out-of-state clearances required | Y N | | Y N | | Y N | | Y N | |
| Date of birth §3290.31(a)(1) operator §3290.31(b) staff |  | |  | |  | |  | |
| Date: Disclosure statement §3290.192(3) |  | |  | |  | |  | |
| **Provisional Hire Waiver Only** |  | |  | |  | |  | |
| Request date – State Police Clearance §3290.192(3)/3290.32(a) |  | |  | |  | |  | |
| Request date – Child Abuse Clearance |  | |  | |  | |  | |
| Date: Employee fingerprinted |  | |  | |  | |  | |
| Request date – NSOR |  | |  | |  | |  | |
| 45-day provisional hire end date |  | |  | |  | |  | |
| Suspend date / Return date |  |  |  |  |  |  |  |  |
|  | **PREVIOUS** | **MOST RECENT** | **PREVIOUS** | **MOST RECENT** | **PREVIOUS** | **MOST RECENT** | **PREVIOUS** | **MOST RECENT** |
| Date: State Police Clearance |  |  |  |  |  |  |  |  |
| Date: Child Abuse Clearance |  |  |  |  |  |  |  |  |
| Date: FBI Clearance |  |  |  |  |  |  |  |  |
| Date: NSOR Certificate |  |  |  |  |  |  |  |  |
| Date: Mandated reporter training |  |  |  |  |  |  |  |  |
| Date: Health assessment  §3290.151(c)(1)/§3290.192(2) |  |  |  |  |  |  |  |  |
| Mantoux test read/results (circle one)  §3290.151(c)(2)/§3290.192(2) | POS NEG  Date: | | POS NEG  Date: | | POS NEG  Date: | | POS NEG  Date: | |
| Signature MD/CRNP/PA §3290.151(b) | Y N | | Y N | | Y N | | Y N | |
| Proof of HS Dip./GED §3290.31(a)(2) | Y N | | Y N | | Y N | | Y N | |
| Date: Pediatric first-aid / CPR training  §3290.31(f)(4)(i)/§3290.31(g)(10) |  |  |  |  |  |  |  |  |
| 12 hours of annual professional development §3290.31(f)/3290.192(4) | Y N | | Y N | | Y N | | Y N | |
| Date: CCDBG health and safety professional development[[1]](#footnote-1) §3290.31(g-h) |  | |  | |  | |  | |
|  | **PREVIOUS** | **MOST RECENT** | **PREVIOUS** | **MOST RECENT** | **PREVIOUS** | **MOST RECENT** | **PREVIOUS** | **MOST RECENT** |
| Date: Emergency plan training §3290.24(c) |  |  |  |  |  |  |  |  |
| Date: Water safety training  §3290.31(f)(4)(iii)/§3290.115(7)(8) |  |  |  |  |  |  |  |  |

1. CCDBG health and safety professional development shall be completed withing 90 days of hire for new staff persons and by June 17, 2021 for current staff persons hired as of December 19, 2020 [↑](#footnote-ref-1)