

SUPPLEMENTAL APPLICATION FOR DAYCARE EXPOSURE

Required if Daycare Operations are reported

ENTITY INFORMATION

ENTITY NAME	TYPE OF ENTITY	COUNTY
ENTITY CONTACT PERSON	CONTACT PERSON'S TITLE	CONTACT PERSON'S EMAIL
SIGNATURE OF AUTHORIZED ENTITY REPRESENTATIVE REQUIRED ON PAGE 4		

GENERAL INFORMATION

1. Is the daycare licensed by the State of Missouri? Yes No
If "No", explain: _____

2. Has a license to operate ever been denied, suspended or revoked? Yes No
If "Yes", explain thoroughly on a separate document.
3. What are the hours of operation? _____
4. Provide enrollment information, based on maximum children enrolled on the busiest day. **Include after-school programs.**

Age Group	Number of Children	Number of Teachers
Infants, ages 0 – 1		
Toddlers, ages 1 – 2		
Toddlers, ages 2 – 3		
Preschoolers, ages 3 – 5		
School Age Children		

LIABILITY EXPOSURE INFORMATION

Policies & Procedures

5. Does the employment process (for employees, volunteers, and independent contractors) include verification of conviction of any crime, including sex-related or child abuse related offenses before an offer of employment is made? Yes No
6. Does new staff orientation include training on child/sexual abuse, how to recognize the signs of child/sexual abuse, and how to respond to a child's report that he or she has been molested? Yes No
7. Does the entity have written procedures for dealing with sexual abuse? Yes No
MANDATORY: Provide a copy of procedures.

8. Has any incident ever resulted in an allegation of sexual abuse? Yes No
If "Yes" answer the following:

- a. Was a claim made against the entity? Yes No
- b. Is that individual still employed/affiliated with the entity? Yes No
- c. What changes were made to prevent recurrence? _____

9. Are national criminal background investigations performed and is a sex offender register check completed on all:

- Employees? Yes No
- Volunteers? Yes No
- Independent contractors? Yes No

If "No", explain: _____

10. Does entity contract with any vendors who have contact with any of the children? Yes No
If "Yes", explain: _____

11. Are there any other circumstances in which other adults have access to any of the children? Yes No
If "Yes", explain: _____

12. What is the policy on corporal punishment? Allowed Prohibited
If "Allowed", copy of written policy concerning use of corporal punishment must be submitted.

13. Have there ever been any claims for corporal punishment? Yes No
If "Yes", explain thoroughly on a separate document.

Health, Security & Safety

14. Describe the entity's daily check-in and release procedures.

15. Are sick child or drop-in services provided? Yes No
If "Yes", explain: _____

16. Are any premises protected by security personnel? Yes No

17. If "Yes", are the security personnel

- a. Sub-contracted? Yes No
- b. Employed? Yes No
- c. Other? (Explain) _____

18. Is the play area fully fenced? Yes No
19. Describe the all play equipment in the play area. _____

20. Describe the controls in place to assure that children access only age-appropriate play equipment. _____

21. Are any trampolines or inflatables present? Yes No
22. Does the entity have a written emergency evacuation plan in effect? Yes No
23. Does entity provide transportation for the children? Yes No
24. Describe the transportation provided: _____

25. Which of the entity's vehicles are used for transporting children? _____

26. How are children accounted for getting in/out of vehicle? _____

27. Are employees or volunteers allowed to transport children in personally-owned vehicles? Yes No
28. How many field trips are taken per year? _____
29. Describe the field trips: _____

30. Describe any other off-premises travel: _____

31. What are entity's licensure requirements for drivers? _____

32. Does entity have formal driving policy with MVR standards? Yes No
 If "Yes":
- a. Is driving policy communicated in writing to all employees & volunteers? Yes No
 - b. Is a signed acknowledgment form kept on file? (If "Yes", provide copy) Yes No
 - c. Do driving standards include the following:
 - i. No major violations (including DUI, racing, hit and run, speeding in excess of 20 mph over posted speed limit, manslaughter)? Yes No
 - ii. No more than 2 moving violations within past 3 years? Yes No
 - iii. No more than 1 at-fault accident within past 3 years? Yes No
33. How often does entity check MVR reports? _____

DECLARATION AND SIGNATURE

I certify that the foregoing responses are complete, true and correct, with the knowledge and understanding that MOPERM will extend coverage and determine appropriate contributions based on these responses.

Entity Representative Signature

Date

Please Print Name

Title