## Family Child Care Home Licence Application

Did you view the online **Family Child Care Home Applicant Information Session**? Please complete the information session **before** submitting your application.

Applicant Information			
First Name	Last Name	е	
Previous Names (if applicable)	<b>-</b>		
Date of Birth (yyyy-mm-dd)			
Street Address			
City/Town	Postal Co	Postal Code	
Mailing Address Street/Box Number Same as above:			
City/Town	Postal Code		
Email Address		Daytime Phone	
Are you legally entitled to work in Canada? Yes No			
Provide information for all individuals residing in your home, applicable). Attach an additional sheet, if necessary.  First and Last Name			
	Date of Birt	h	Relationship to Applicant

Please attach the original results of a <u>Criminal Record Check, including a Vulnerable Sector</u>
<u>Search</u> for yourself, and any family members or individuals residing in your home 18 years of age or older in separate, sealed envelopes.



What type of Family Child Ca Please check (✓) the appropriate box.	re Home Licence are	you interested in applying for?
Family Child Care Home (maximi	um 8 children)	
Group Family Child Care Home (	maximum 12 children – with a	n assistant)
Deference		
References Please provide the name and addresses of	four character references who	may be consulted by the Ministry of Education.
Immediate family members (parents, siblir	ngs, children) are not accepted	as character references. A maximum of one
		Ministry of Education may also conduct global
reference checks by individuals not listed b First and Last Name	eiow.	
Street Address		
City/Town	Province	Postal Code
E-mail Address	1	Daytime Phone
Relationship to Applicant		,
First and Last Name		
Street Address		
City/Town	Province	Postal Code
E-mail Address	·	Daytime Phone
Relationship to Applicant		
First and Last Name		
Street Address		
City/Town	Province	Postal Code
E-mail Address:		Daytime Phone
Relationship to Applicant		
First and Last Name		
Street Address		
City/Town	Province	Postal Code

E-mail Address		Daytime Phone		
Relationship to Applicant				
Applicant Checklist				
Complete this checklist to assist you in submitting your application form.				
View the online Family Child Care Home Applicant Information Session				
Complete and sign the Family Child Care Home Licence Application Form				
Complete and attach the Family Assessment Questionnaire				
Attach the <b>original</b> results of your Criminal Record Check				
Attach the <b>original</b> results of a Criminal Record Check for anyone residing in the home 18 years of age or older, each in a separate sealed envelope.				
☐ Are you already providing child care in your home? ☐ Yes ☐ No				
☐ Did you attend the Regulated Child Care Home Readiness and Application ☐ Yes ☐ No Support for Newcomers through Saskatoon Open Door Society?				
Applicant Signature  I hereby certify that the information given in this application is accurate and has not been altered in any way.				
Thereby tertify that the information given in this application is accurate and has not been altered in any way.				
Signature		 Date		
applications will not be processed		documents attached. Incomplete		
Mail your complete application to your regional Child Care Operations office.				
North and North Central Region	Central Region	Southern Region		
Child Care Operations	Child Care Operations	Child Care Operations		
Ministry of Education	Ministry of Education	Ministry of Education		
Early Years Branch	Early Years Branch	Early Years Branch		
250 - 1288 Central Avenue	203 - 255 2nd Avenue North	2 – 2220 College Avenue		
PRINCE ALBERT SK S6V 4V8	SASKATOON SK S7K 3P2	REGINA SK S4P 4V9		
For Office Use Only				
Application recommended				
Consultant Signature				
Signature Date				