NEGLEY
ASSOCIATES·INC
UNDERWRITING MANAGERS
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DAY CARE, PRESCHOOL, HEADSTART SUPPLEMENTAL APPLICATION

(TO BE COMPLETED FOR EACH APPLICABLE LOCATION)

1. Applicant _____

   Address _____

   Utilized square footage _____ Fenced yard? ☐ Yes ☐ No Pets or mascots? _____

   Describe all play equipment, indoors and outdoors:

   _____

   _____

   _____

2. Licensed _____ Capacity _____ Hours _____

3.

Age group	**No. of children**	**No. of staff**	**Credentials & Experience of Staff**
1 to 6 months	_____	_____	_____
7 to 12 months	_____	_____	_____
13 months to 3 years	_____	_____	_____
4 years to 5 years	_____	_____	_____
6 years to 8 years	_____	_____	_____
Over 9 years	_____	_____	_____
Over 18 years	_____	_____	_____

   Well Child ____% Mentally Retarded ____% Aged ____% Emotionally Disturbed ____%

   Other ____% Please specify _____

4. Does hiring procedure include: Background/reference check? ☐ Yes ☐ No

   Screening for criminal record? ☐ Yes ☐ No

   Include a brief description of these procedures:

   _____

   _____

   _____

5. Is transportation provided? ☐ Yes ☐ No If yes, explain:

   _____

   _____

6. Provisions for medication, injuries or illness _____

7. Describe procedures and precautions for child's release _____

   _____

   _____

8. Please attach brochure and copies of enrollment Application Form.

(9/04)