

Checklist for Enrollment of an Out of State Child Care Provider

Out-of-State Providers must have the following information prior to enrollment:

Name of Provider: _____

State of Residence: _____

Item Needed	Provider Comments	County/LPA Validation Date	DCDEE Provider Manager Validation Date	Comments
License Status (licensed or license-exempt) <i>(attach copy of license)</i>				
Expiration Date of License				
Center or Home				
Health & Safety Inspection Report (within the last 12 months) <i>(attach copy of report)</i>				
Criminal Record Check or Qualification Letter (owner or director) <i>(attach copy of check/letter)</i>				

Provider must provide documentation from the "Items Needed" column and complete "Provider Comments" column. DSS/LPA should complete "County/LPA Validation Date" column. Submit form and all supporting documentation to:

DCDEE Provider Data Manager
 Email: DCDEE.Subsidy.Submissions@dhhs.nc.gov
 Fax: 919-715-0970