

Municipality of Anchorage Child Care Licensing Program

CHILD CARE FACILITY - ADMINISTRATOR REFERENCE

Administrators of licensed Child Care Homes and Centers are required to submit references from individuals who can attest to their personal and professional experience, reputable character, ability to care for children, and ability to operate a child care facility.

Name of Administrator Applicant:

Name of Facility: _____

Please answer the following questions regarding the Administrator Applicant:

- 1. How long have you known this individual, and in what capacity?
- 2. Please explain how this individual has worked successfully with children and families and acted as a positive role model for children.

- 3. Please explain how this individual's particular skills and abilities will support them to work successfully with children, family members, department staff, community agencies, and staff of the child care facility.
- 4. Please explain how this individual has demonstrated the characteristics of a responsible individual of reputable character, who exercises sound judgment.

5. Describe how you would feel about leaving a child in this individual's care.

- 6. Explain why you believe this individual is qualified to operate a licensed child care facility.
- 7. Explain this individual's administrative and supervisory skills as it would relate to their leadership position in a child care facility.

To your knowledge, has this individual:

8.	Ever abused or neglected a child?	YES	NO 🗌
9.	Been charged with or convicted of a crime?	YES	NO 🗌
To your knowledge, does this individual have:			
10.	A physical or behavioral health problem that poses a significant risk to children in care?	YES	NO 🗌
11.	A domestic violence problem that poses a significant risk to children in care?	YES	NO 🗌

If you answered YES to any of the questions 8-11, please explain.

12. Please include any additional comments and/or information you would like to share:

You may also contact the Child Care Licensing program at 907-343-4758 with any questions or concerns. A Child Care Licensing Specialist may follow up with you regarding this reference.

Thank you for your assistance.

Printed Name of Individual Providing Reference

Phone Number

Date

Signature of Individual Providing Reference