

Utah Department of Health, Bureau of Child Care Licensing
Center Renewal Application, Staff Record Form

Center Name:

Center Address:

Date Review Completed: / /

Date of last Announced Inspection: / /

Please follow the attached instructions when completing this form. List all owners, employees, volunteers, and members of your governing board (if you have one). In order for your license to be renewed, this form must be accurately completed before your Announced Inspection takes place. Your Licensing Specialist will collect this completed form as part of your Announced Inspection.

	1. First Name	2. Middle Name	3. Last Name	4. Start Date (First date of paid work, for those hired after your last Announced Inspection) (mm/dd/yyyy)			5. Position(s) (Owner, Director, Assistant Director, Caregiver, Cook, Driver, Custodian, Volunteer, Board Member, or Other)	FOR LICENSING OFFICE USE ONLY: Listed on current CBS / MIS Renewal Form & Disclosure Statement?		
								Yes	No	
1.				/	/			Yes	No	
2.				/	/			Yes	No	
3.				/	/			Yes	No	
4.				/	/			Yes	No	
5.				/	/			Yes	No	
6.				/	/			Yes	No	
7.				/	/			Yes	No	
8.				/	/			Yes	No	
9.				/	/			Yes	No	
10.				/	/			Yes	No	
11.				/	/			Yes	No	
12.				/	/			Yes	No	
13.				/	/			Yes	No	
14.				/	/			Yes	No	
15.				/	/			Yes	No	
16.				/	/			Yes	No	

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17.				/ /		Yes		No
18.				/ /		Yes		No
19.				/ /		Yes		No
20.				/ /		Yes		No
21.				/ /		Yes		No
22.				/ /		Yes		No
23.				/ /		Yes		No
24.				/ /		Yes		No
25.				/ /		Yes		No
26.				/ /		Yes		No
27.				/ /		Yes		No
28.				/ /		Yes		No
29.				/ /		Yes		No
30.				/ /		Yes		No
31.				/ /		Yes		No
32.				/ /		Yes		No
33.				/ /		Yes		No
34.				/ /		Yes		No
35.				/ /		Yes		No
36.				/ /		Yes		No
37.				/ /		Yes		No
38.				/ /		Yes		No
39.				/ /		Yes		No
40.				/ /		Yes		No

If the center has more than 40 staff, copy and use the additional page below.

