

**REQUEST FOR AUTHORIZATION TO OPERATE A FAMILY CHILD CARE HOME FACILITY
ABOARD MARINE CORPS BASE, CAMP PENDLETON**

Print Form

Privacy Act Statement

SORN NM01754-3

AUTHORITY: 10 U.S.C. 5013, Secretary of the Navy; 10 U.S.C. 5041, Headquarters, Marine Corps; DoD Instruction 6060.2, Child Development Programs; DoD Instruction 6060.3, School Age Care Program; DoD Instruction 6060.4, Youth Programs; OPNAV Instruction 1700.9 series, Child and Youth Programs; Marine Corps Order P1710.30E, Children, Youth, and Teen Program (CYTP); and E.O. 9397 (SSN), as amended.

PRINCIPAL PURPOSE: To develop child care programs that meet the needs of children and families; provide child and family program eligibility and background information; and verify health status of children and verify immunizations.

ROUTINE USES: To Local, State, and Federal officials involved in Child Care Services, if required, in the performance of their official duties relating to child abuse reporting investigations.

DISCLOSURE: Disclosure of personal information is voluntary. However, if requested information is not provided, request to operate an Family Child Care home facility aboard Marine Corps Base, Camp Pendleton will not be considered.

NAME OF PROVIDER (Last, First, Middle Initial (MI)): _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

DRIVER'S LICENSE NUMBER: _____ STATE: _____ PHONE: _____

ADDRESS: _____ CITY, STATE: _____ ZIP CODE: _____

NAME OF SPONSOR (Last, First, MI): _____

ORGANIZATION: _____ DUTY PHONE: _____

DUTY STATION: _____ RANK/GRADE: _____

PROVIDER'S EMPLOYMENT HISTORY FOR THE PAST FIVE YEARS:

EMPLOYER: _____ SUPERVISOR'S NAME: _____ PHONE: _____

EMPLOYER: _____ SUPERVISOR'S NAME: _____ PHONE: _____

EMPLOYER: _____ SUPERVISOR'S NAME: _____ PHONE: _____

HOUSEHOLD INFORMATION (List all members of your household):

FULL NAME (Last, First, MI)	DATE OF BIRTH	RELATIONSHIP

LIST ALL PETS, INCLUDING TYPE AND BREED: _____

1. We will request permission in writing to make any modifications to the facility (house or surrounding yard). We will return the facility to its original state before vacating the premises, unless the next occupants accept responsibility for modifications.
2. We will be responsible for any negligence in the operation of our Family Child Care (FCC) facility.
3. We will be financially responsible for all damages to family quarters beyond normal "wear and tear".
4. We will accept responsibility for all monies due to United States Marine Corps/United States government for any premiums due for FCC Group liability insurance.
5. Maximum capacity for FCC remains at six children, including the provider's own children under the age of eight years. Child care is authorized for six week old infants in FCC. The FCC home shall be limited to no more than two infants under two years of age.
6. We agree that our quarters are subject to unannounced inspections by the FCC Director's staff and appropriate Camp Pendleton agencies.
7. We acknowledge that the privilege to use our assigned military quarters for a FCC home facility may be withheld or withdrawn by the Commanding General, Marine Corps Installations West-Marine Corps Base, Camp Pendleton for failure to comply with the Marine Corps Order (MCO) 1710.30E or in the interest of good order or neighborhood relations. We also acknowledge that failure to comply with MCO 1710.30E or base regulations concerning FCC may result in our termination of assignment of quarters.

SIGNATURE OF SPONSOR: _____ DATE: _____

SIGNATURE OF PROVIDER: _____ DATE: _____