



DVN

PROGRAM EVALUATION QUESTIONNAIRE (PEQ)

INSTRUCTIONS

To determine if a child care program is required to be licensed as described in Sections 210.211 and 210.201 RSMo, the program must complete this evaluation. All required fields and supporting documentation must be completed and returned to:
Office of Childhood-Child Care Regulation
PO Box 480
Jefferson City, MO 65102
Fax: (573) 526-5345 or Email: CCEmptions@dese.mo.gov

If you or a member of your immediate family ever served in the U.S. Armed Forces, [click here for more information about military-related services in Missouri](#) or visit www.dese.mo.gov/veterans-services.

PROGRAM INFORMATION

TYPE OF EVALUATION (CHECK ONLY ONE) <input type="checkbox"/> NEW PROGRAM APPLICANT <input type="checkbox"/> CHANGE/UPDATE TO EXISTING PROGRAM		SERVICE PROVIDED (CHECK ALL THAT APPLY) <input type="checkbox"/> INFANT/TODDLER CHILD CARE <input type="checkbox"/> PRESCHOOL CHILD CARE <input type="checkbox"/> SCHOOL-AGE CHILD CARE	
NAME OF CHILD CARE PROGRAM			
PROGRAM ADDRESS (STREET, CITY, STATE ZIP CODE)		COUNTY	
MAILING ADDRESS (STREET, CITY, STATE ZIP CODE) <input type="checkbox"/> CHECK IF SAME AS PROGRAM ADDRESS		PROGRAM PHONE NUMBER	
EMAIL ADDRESS		WEB ADDRESS	

ADMINISTRATION INFORMATION

LEGAL NAME OF OWNER(S), ORGANIZATION, OR CORPORATION OPERATING THE PROGRAM (AS FILED WITH OFFICE OF SECRETARY OF STATE)	
OWNER ADDRESS (STREET, CITY, STATE ZIP CODE)	OWNER PHONE NUMBER
CONTACT PERSON (NAME AND TITLE)	CONTACT PERSON PHONE NUMBER

OPERATIONAL DETAILS

Provide information on child care program operations below:

IS THE PROGRAM CURRENTLY IN OPERATION? <input type="checkbox"/> YES - DATE OPERATION BEGAN _____ <input type="checkbox"/> NO - TARGET OPENING DATE _____			
HOURS OF OPERATION	DAYS OF OPERATION <input type="checkbox"/> MON <input type="checkbox"/> TUE <input type="checkbox"/> WED <input type="checkbox"/> THU <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN	AGE RANGE OF CHILDREN THROUGH	
MONTHS OF OPERATION <input type="checkbox"/> JAN <input type="checkbox"/> FEB <input type="checkbox"/> MAR <input type="checkbox"/> APR <input type="checkbox"/> MAY <input type="checkbox"/> JUN <input type="checkbox"/> JUL <input type="checkbox"/> AUG <input type="checkbox"/> SEP <input type="checkbox"/> OCT <input type="checkbox"/> NOV <input type="checkbox"/> DEC	TOTAL CHILDREN	TOTAL UNDER 24 MONTHS	
MAXIMUM NUMBER OF HOURS A CHILD MAY ATTEND EACH DAY		NUMBER OF EMPLOYEES CHILDREN ENROLLED IN THE PROGRAM	
EXPLAIN HOW YOU ARE/WILL BE COMPENSATED FOR PROVIDING YOUR SERVICE (TUITION, GRANT FUNDING, DONATIONS, ETC.)			
IS THIS PROGRAM CURRENTLY ACCEPTING OR PLANNING TO ACCEPT CHILD CARE SUBSIDY PAY FOR CHILDREN IN CARE?			<input type="checkbox"/> YES <input type="checkbox"/> NO
EXPLAIN WHAT TYPE OF ACTIVITIES YOUR PROGRAM DOES/WILL OFFER			
DOES THIS OWNER OR ORGANIZATION OPERATE ANY OTHER CHILD CARE PROGRAM? <input type="checkbox"/> YES <input type="checkbox"/> NO ➤ IF YES, PROVIDE DVN AND ADDRESS OF PROGRAM _____			
ARE THERE OTHER REGULATED CHILD CARE PROGRAMS LOCATED WITHIN THE SAME SPACE? <input type="checkbox"/> YES <input type="checkbox"/> NO ➤ IF YES, PROVIDE A DIAGRAM OF THE SPACE USED BY BOTH PROGRAMS THAT INDICATE THEY DO NOT SHARE THE SAME SPACE SIMULTANEOUSLY.			

Check the Regulatory Status that most applies to your child care program below and indicate supporting documentation:

- Graded Boarding School.** Child care program operated by an organization requiring in seat attendance to provide education.
- Summer Camp.** Child care program operated from May to September by a person or organization with the primary function of providing a summer recreational program for children no younger than 5 years of age, and providing no care for children younger than 5 years of age in the same space or in the same outdoor play area simultaneously.
- Day Camp.** Child care program operated between the hours of 6:00 a.m. and 7:00 p.m. when a local school system is not in session requiring student attendance, with the primary function of providing a recreational program for children 5 years of age or older who are enrolled in Kindergarten or above, and providing no care for children younger than 5 years of age in the same space or in the same outdoor play area simultaneously.
 - A copy of the program's calendar of operations while the local school system is not in session requiring student attendance.
- Hospital.** Licensed or regulated to provide medical treatment, nursing, or convalescent care for children.
 - Documentation that the program is licensed or regulated by another State of Missouri entity.
- Department of Mental Health.** Licensed by the Department of Mental Health which provides care, treatment and diagnosis of mental disorder, mental illness, intellectual disability, or developmental disability.
 - A copy of the license issued by the Department of Mental Health (DMH).
- Public School System.** Child care program operated by public school system elementary and secondary schools.
- Montessori School.** Child care program operated by a school that is accredited by, actively seeking accreditation by, or maintains an active school membership with the American Montessori Society, the Association Montessori Internationale, the International Montessori Counsel, or the Montessori Educational Programs International.
 - Evidence that the school is accredited, actively seeking accreditation, or maintains an active school membership.
- Business of convenience of its customers.** Business establishment which provides child care as a convenience for its customers or employees for no more than four hours per day while the customers or employees remain on site.
- Religious Organization Academic Preschool.** Child care program exclusively for 4- and 5-year-old children that is operated by a religious organization.
- Weekly Sunday School or Vacation Bible School.** A ministry outreach child care program provided by a religious organization to provide religious education to children; child care made available while parents or guardians are attending worship services; other meetings and activities conducted or sponsored by a religious organization for religious education of children.
 - Evidence that the administration is a religious organization.
- Neighborhood Youth Development Program.** Child care program that provides activities for children 5 to 18 years of age and is affiliated and in good standing with a national congressionally chartered organization.
 - A copy of documentation showing that the program is affiliated and in good standing with national congressionally chartered organizations standards under Title 36, Public Law 105-225.
 - Information indicating the program meets requirements set forth by Section 210.278 RSMo.
- Sixth Grade and Above.** Child care program serving only children enrolled in grade 6 or above.
- Religious School.** Child care program operated by a religious organization elementary or secondary school.
 - Evidence that the administration is a religious organization.
- Private School.** Child care program operated by private organization elementary and secondary schools.
 - Evidence that a student enrolled will be accepted by another school for transfer.
- Nursery School.** Child care program for preschool children that is operated for no more than four hours per child per day.
- Religious Organization.** Child care program owned and operated exclusively by a church, synagogue, or mosque; an entity that qualifies for federal tax exemption status as a not-for-profit religious organization under Section 501(C)(3) of the Internal Revenue Code; or an entity whose real estate on which the child care facility is located is exempt from taxation because it is used for religious purposes.
 - Evidence that the administration is a religious organization.

DISCLOSURE STATEMENTS

I certify that the program will notify parents in writing of the child care program's unlicensed status and keep a signed copy of this notice on file at the facility after enrollment as required in Section 210.211.3 RSMo.	<input type="checkbox"/> YES <input type="checkbox"/> NO
I certify that the program will provide the child care program's disciplinary philosophy to parents as required in Section 210.211.3 RSMo.	<input type="checkbox"/> YES <input type="checkbox"/> NO
I certify that the program will provide the child care program's policies to parents as required in Section 210.211.3 RSMo.	<input type="checkbox"/> YES <input type="checkbox"/> NO

SIGNATURES

By signing below, I confirm that the information provided on this form is accurate, true, and complete.

NAME OF THE DIRECTOR OF THE PROGRAM (PLEASE PRINT)	
SIGNATURE OF THE DIRECTOR	DATE
NAME OF THE OWNER(S)/ BOARD PRESIDENT/ ADMINISTRATOR/ DESIGNEE (PLEASE PRINT)	TITLE
SIGNATURE OF THE OWNER(S)/BOARD PRESIDENT/ADMINISTRATOR/ DESIGNEE	DATE