When you visit the site, bring this checklist with you so you remember to ask these important questions.

| | Name of Location | Name of Location | Name of Location | Notes |
|---|------------------|------------------|------------------|-------|
| | | | | |
| | | | | |
| General | | | | |
| Is it conveniently located for you? | | | | |
| What is the cost of the program? | | | | |
| Are adults warm and welcoming? | | | | |
| What ages of children do they accept? | | | | |
| Is the location licensed? | | | | |
| How many children are they licensed to | | | | |
| accept? | | | | |
| How many infants? | | | | |
| What meals and snacks do they provide? | | | | |
| Are the meals and snacks healthy and | | | | |
| nutritious? | | 1 | | |
| | | | | |
| Supervision | | | | |
| What is the ratio of children to teacher? | | | | |
| If a center: | | | | |
| Does the director have a degree and expe- | | | | |
| rience caring for children? | | - | | |
| Are the teachers credentialed? | | - | | |
| If a family child care home: | <u> </u> | 1 | | |
| Has the provider had specific training on child development and experience caring | | | | |
| for children? | | | | |
| | | | | |
| Safety and Well Being | | | | |
| Is there always someone present who has | | | | |
| current CPR and first aid training? | | | | |
| Is the location clean and orderly? | | | | |
| Is there a specific area reserved for diaper | | | | |
| changing that is clean and sanitized? | | | | |
| Do all children enrolled have the required immunizations? | | | | |
| Are cleaning supplies, medicines, and | | | | |
| other poisonous materials locked up out of | | | | |
| children's reach? | | | | |
| Is there a safety plan in the event of an emergency? | | | | |
| Are first aid kits readily available? | | | | |
| Have all adults who are present with | | | | |
| children had background checks? | | | | |
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