

Family Child Care Homes are operated by caregivers, within private residences, which are monitored and approved by the Maryland State Department of Education and meet minimum health, safety and program requirements. Family homes can support a maximum of 8 children.

If you are interested in applying, follow the steps below to complete your application. Remember, all fields marked with a red asterisk (*) are mandatory fields. You will not be able to advance through the application process without answering those questions.

1. Click Licensing Application



2. Click Licensing Application Dashboard

MARYLAND ETA EDUC EQUITY AN	TE DEPARTMENT OF ATION	CHILD CARE PROVIDER PORTAL		
	Home	Licensing Application	Informal Application	Attendance & Invoicing
		Licensing Application D	ashboard	
	Select "Lice	Document Center	e navigation bar to begin a new	application or to continue an exist

3. Click Start New Application

	Home	Licensing Application	Informal Application	Attendance & Invoicing	Program Information	Scholarship Requests	Delegated Admin
LI	censing A	pplication Dashboa	ra			Start New Applicat	ion
	Unsubmitted	Applications				>	
	Submitted Ap	oplications				>	
	Linked Licens	es and Registrations				>	

- 4. Select Family Child Care Home Registration
- 5. Click Next

igi acaiacióna i	yn your interest in becoming approved by the Maryuand state Department of Education to denver quality early education and care to children. Please select the type of child care incense you would like to apply for.	
Licensed Cl Child Care Co	ild Care Center Inters are professionally staffed facilities seening large groups of dilidees. The facilities are monitored and approved by the Maryland State Department of Education and must meet minimum health, safety and program requirements.	>
Letter of Co Letter of Con	ampliance pliunce refers to non-parental care of children in nursery schools child care taclifies operated by either a tax-exempt religious organization or a tax-exempt organization in a school building.	>
Family Chil Family homes children.	d Care Home Registration Lars operated by non-relidive caregivers within private residences which are monitored and approved by the Maryland State Department of Education and must meet minimum health, safety and program requirements. Family homes can support a maximum of 8 Lars operated by non-relidive caregivers within private residences which are monitored and approved by the Maryland State Department of Education and must meet minimum health, safety and program requirements. Family homes can support a maximum of 8	>
Large Famil Large Family	y Child Care Home Registration Home ar experied by carefules, which private residences which are nonlineed and approved by the Maryland State Department of Education and must meet minimum health, safety and program requirements. Large family homes can support 9 to 12 children.	>

- 6. Select the region you live in from the drop down
- 7. Select "Yes" or "No" to the question "Do you already have an active license or registration with the state of Maryland for the license type that you are applying for?"
 - a. If you answer "No", you will be asked "If you have attended an orientation for the license type that you are applying for?"
 - i. If you answer "No", you will be asked to register for an orientation
 - b. If you answer "Yes", you will be asked "Which type of orientation did you attend?"
- 8. Click Save & Continue

Facility Licensing
The Maryland State Department of Education (MSDE) requires all prospective child care providers to attend an orientation before submitting a formal application for licensure. These orientations are an opportunity for prospective child care providers to learn about the opportunities, as well as the requirements to become licensed by MSDE. Please confirm your participation in an MSDE orientation below. MSDE will confirm your participation in the orientation before reviewing and/or approxing your application. Fields marked by " are required.
* In which Region is your home located?
· · · · · · · · · · · · · · · · · · ·
* Do you already have an active license or registration with the state of Maryland for the license type that you are applying for?
(10)
*Have you attended an orientation for the license type that you are applying for within the last year?
(Vis
"Which type of orientation did you attend!
Cardel Save & Cardoua

9. Read the Instructions and click Save & Continue

Family Child Care Home Application	Steps	
Instructions	Instructions	
Congratulations on pursuing formal registration with the Maryland State Department of Education Office of Child Care. The State of Maryland requires all prospective family child care home providers	Applicant Status	
to obtain registration from the Maryland State Department of Education (MSDE) before serving children. As a child care provider, it is your responsibility to learn and abide by the child care licensing	Applicant Information	
regulations for operating a family child care home. You can access these regulations at <u>Division of State Documents</u> ,	Address and Contact Information	
	Address Verification	
APPLICATION FOR FAMILY CHILD CARE REGISTRATION	 Residence Information 	
Thank you for your interest in becoming a registered family child care provider. Please note: submitting an application is not authorization to provide child care services. You may not operate a child	Other Individuals Living in the Residence	
care program until you receive your certificate of registration from the Maryland State Department of Education Office of Child Care. You will be asked to include a copy of your government issued	Additional Information	
proto to as part or your application.	Additional Document Uploads	
	 Sign & Submit 	
Eit Sone à Continue		

- 10. Answer "Are you the primary applicant or the co-provider applicant for this family child care home?"
 - a. If you are the Co-Applicant, you will need to <u>download the co-provider application</u>, fill it out, and share it with the primary applicant for them to upload it as a supporting

document.

Family Child Care Home Application	Steps
Applicant Status	Instructions
Please answer the following questions about yourself, the applicant. Fields marked by* are required.	Applicant Status
	0 Applicant Information
-Answer the winner well-rest or the mean-idear well-rest for this family shift rank bone)	Address and Contact Information
Are too dreg immary approximate or decorporations and provide approximate does named and approximate approximate does named and approximate ap	Address Verification
	Residence Information
Only the primary application of the family child care home should complete and submit an application on the portal. As the co-provider application, fill it out, and share it to the originate and submit an application on the portal. As the co-provider application, fill it out, and share it to the originate and submit and application on the portal. As the co-provider application, fill it out, and share it to the originate and submit an application on the portal. As the co-provider application, fill it out, and share it to the originate and submit and application on the portal. As the co-provider application, fill it out, and share it to the originate and submit and application on the portal. As the co-provider application, fill it out, and share it to the originate and submit and application on the portal. As the co-provider application, fill it out, and share it to the originate and submit an application on the portal. As the co-provider application, fill it out, and share it to the originate and submit and application on the portal. As the co-provider application, fill it out, and share it to the originate and submit an application on the portal. As the co-provider application, fill it out, and share it to the originate and submit and	Other Individuals Living in the Residence
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	Additional Document Uploads
	0 Signá Submit
Exit Previous Serve & Continue	

- b. If you are the Primary Applicant, answer the question "Are you applying for your first registration or a resumption of service?" Note: A resumption of service only applies to approved active family providers who are moving to a new location or family providers that closed and want to re-open within six months of their closure date.
 - i. If it is a resumption of service, complete the form that populates.

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Family Child Care Home Application		Steps
Applicant Status		Instructions
Please answer the following questions about yourself, the applicant. Fields marked by * are required.		O Applicant Status
		 Applicant information
*Are you the primary applicant or the co-provider applicant for this family child care home?		Address and Contact Information
🔮 Primary Applicant 🔿 Co-Provider Applicant		 Address Verification
Are you applying for your first registration or a resumption of service?		 Residence information
O First Registration 🥥 Resumption Of Service		Other Individuals Living In the Residence
		Additional Ansametica
Submitting a request for a resumption of service does not authorize you'to deliver child care services. You must held a current li- previously registered by MEDE requires a site visit from a licensing inspector.	sense or negistration with the Manytand State Department of Education to operate a child care program. Even a resumption of service at an address	Sent Schmitt
What was your previous Maryland State Department of Education registration number?		1
What was your previous address?	Address Line 2	
<u></u>)
*City O	*County O	
"State 0	*Zip Code 💿	
Maryland		
		1
Select which age groups you intend to serve.		
Under 2 years old 2 years through 5 years old Kindergarten through 12 years old] 13 years through 20 years old (Special Needs)	
	10-10-10-10-10-10-10-10-10-10-10-10-10-1	
Ealt	Previous Serve & Continue	

12. Complete the Applicant Information Section

13. Click Save & Continue

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Family Child Care Home Application Applicant Information Please provide the Maryland State Department of Education with Information about yourselt, the applicant, P	elds marked by " are required.	Steps virtuations Austractiona ApplicatioNemation
*Pint Name Midde Name Are: Provide had any other name, please list them here.	*Last Name Molden Name Gos	Adhran ed Carlan Information Adhran ed Carlan Information Restores Information Additional Unity of the Restorese Additional Unity of the Restorese Additional Document Uplands
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*Eholdty *Frimary Spoken Language	*Methal Status * * * * * * * * * *	
Trandar Ngle .	Providen Servic Continue	

14. Complete the Address and Contact Information Section

Family Child Care Home Application Address and Contact Information		Steps resource land
Please provide the Maryland State Department of Education with some additional information about	t your residence. Fields marked by " are required.	Applicant status
		Applicant Information
Address Information		Address and Contact Information
		 Address Verification
*Street Address	Address Line 2	 Residence Information
		Other Individuals Living in the Residence
*City	*County	Additional Information
		Additional Document Uploads
·		 Sign & Submit
*State	*Zip Code	
Maryland		
Contact Information		
*Email Address 💿	*Telephone Number	
alexdoe@vopmail.com		
	Error: Telephone Number la required.	
* If currently working, can you receive calls at work?		
O Yes O No		
D.C.	Brandour Sour & Continue	
EUG	Previous Save & Containue	

16. Select Use USPS Verified Address or Use Provided Home Address

17. Click Save & Continue

ramity Child Care Forme Application	
Address Verification Address Verification	
We have modified the annihild address to a LICDC varified address to accurate delivery of mailed documents	
The mere income the protocol address to a dot or to income output or dot or terms address to a d	
Application for the second secon	
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Provided Address	
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Country Constraints	
Zip Code	
21222-6125	
Use USPS Verified Address Use Provided Hone Address	
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Fait Brying Series	

18. Complete the Residence Information Section

Family Child Care Home Application			Steps
Residence Information			Instructions
Please answer the following questions about your residence. Fields marked by * are required.			 Applicant Status
			Applicant Information
			 Address and Contact Information
*What is your status at your residence?			 Address Verification
		•	O Residence Information
In what year was your property built?			 Other Individuals Living in the Residence
			Additional Information
<u></u>			 Additional Document Uploads
Do you have a Lead Risk Reduction Certificate?			 Sign & Submit
O Yes O No			
*Do you have a Lead Free Certificate?			
O Yes O No			
Please identify the type of water supply at your residence.			
O Private/Well Water O Public			
Prease identity the type of sewage disposal at your residence. Sectic O Public			
* Is your home located in a condominium or a neighborhood that requires Homeowner's Association membership?			
O Yes O No			
Foster Care Information			
*Are you a child/adult foster care provider, or applying to become one?			
O Yes O No			
Exit	Previous	Save & Continue	

- 20. Complete the Other Individuals Living in the Residence Form (if applicable)
- 21. *Click* **Add Individual** (All individuals living in the home, regardless of age, must be reported to the Maryland State Department of Education)

Family Child Care Home Application	Steps
Other Individuals Living in the Residence	Instructions
The Maryland State Department of Education (MSDE) requires applicants to provide information on all individuals living in the residence. For each individual living in the residence (excluding yourself, the applicant), please click	Applicant Status
on the "Add individual" button and answer the corresponding fields. As a reminder, all individuals aged 10 and older living in the residence will be required to clear a comprehensive background check prior to the applicant	Applicant Information
promanguare i recominantes oy laret equires.	Address and Contact Information
Individuals Residing in the Home	Address Venhcation Basiners Information
Please ensure all individuals living in your residence are reflected in the table below. You can edit or delete the information for each individual by clicking the arrow icon.	O Other Individuals Living in the Residence
	Additional Information
NAME DATE OF BIRTH	Additional Document Uploads
Add Individual	Sign & Submit
"Is any adult living in your residence an employee of the Maryland State Department of Education (MSDE)?	
No *	
Ent Serve & Continue	

22. Complete the Individuals Residing in the Home Form

23. Click Save

Individuals Residing in the Home Researed all individuals (including children) who live in the home. Holds marked by * are required		
*First Name	Midde Name	*Last Name
*Relationship to Applicant	*Date of Sith	Social Security Number
		Cancel Seve

24. Repeat this process for all individuals residing in the home

25. Click Save & Continue

Family Child Care Home Application	Steps
Other Individuals Living in the Residence	Instructions
The Marylee Batz Department of Education (MGD) (paginer spatiants to provide Information on all Infoldula Inform in the evolutions for each infoldula Inform in the evolutions for each infoldula Information on all Market Marylee educations and anyone the company of the spatiant) allowed educ on the Yadd rold Aust Department of Education (MGD) (paginer spatiants to provide Information on all Infoldula Information on all Infoldula Information on all Infoldula Information on all Infoldula Information on all Information on all Infoldula Information on all Infoldula Information on all Information on all Information on all Information on all Infoldula Information on all Infoldula Information on all Information on	Applicant Status Applicant Information Address and Contact Information
Individuals Residing in the Home Please ensure all individuals living in your residence are reflected in the table below. You can edit or delete the information for each individual by clicking the arrow icon.	Address Verification Residence Information Other Individuals Living in the Residence
NAME DATE OF BITH Add ballout	Additional Information Additional Document Uploads San & Submit
*Is any adult hing in your residence an employee of the Maryland State Department of Education (MSDE)? No *	
Erit Science Science	

26. Complete the Additional Information Section

27. Click Save & Continue

Family (Child Care Home Application		St	teps
Addition	nal Information		•	Instructions
Please provid	ide the Maryland State Department of Education with additional information on the individuals living in your residence (including yourself, the applicant.) Fields may	arked by * are required.	•	Applicant Status
			0	Applicant Information
		ladh ann aite diasaite a	0	Address and Contact Information
○ Yes	or any other persons inving in your residence ever been convicted or any criminal charge, or received a probation before judgment disposition, or received a not criminal charge.	ninally responsible disposition?	0	Address Verification
0			0	Residence Information
*Are you or a	any other persons living in your residence awaiting trial on any criminal charge? 0		0	Other Individuals Living in the Residence
O Yes	O No		0	Additional Information
*Have you o	or any other persons living in your residence ever been reported for child abuse or neglect? 0			Additional Document Uploads
() Yes	○ No			Sign & Submit
*Have you er	ever been licensed, or have you applied to become licensed, registered or certified to provide child care in any other county, state, or federal jurisdiction?			
() Yes	O No			
• Have you e	ever had a license, registration, or certificate for any type of care denied, suspended, or revoked? 0			
() Yes	○ No			
Exi	dt Previous	Save & Continue		

28. Upload All Supporting Documents

a. Documents can be uploaded in the following formats: .PDF, .JPG/.JPEG, .GIF, .TIF/.TIFF

29. Click Upload Files

dditional Document Uploads exists at Maryland readers prospective diff are providers to upload the following documents approx their application for MSDE Electrone. Rease review the dust below to determine which documents apply to your stilly's application. Rease note: POT documents and photos are accepted. The document side of each must be 108 or leas. Application for Family Child Care Registration If you have a co-provider. they must also complete the Application for Family Child Care Registration. Thuse that they complete all forms that are required for the co-provider. This form can be downloaded laces Upload Files Provider Information All child care programs must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded laces Upload Files Upload Files Provider Information If child care programs must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded laces Upload Files Upload Files Provider Information If child care programs must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded laces Upload Files Upload Files Information If child care programs must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded laces Upload Files Information If child care programs must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded laces Upload Files Information If child care programs must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded laces Information If child care programs must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded laces If child care programs must submit their Provider Information IVerification of Residents and Substitutes). This form can be downloaded laces If child care programs must submit their Provider Information IVerification	nily Child Care Home Application	5	Steps
Application for Family Child Care Registration Application for Family Child Care Registration Advent information Brandron Information Concentration Specification for Family Child Care Registration. Ensure that they complete all forms that are required for the co-provider. This form can be downloaded bars Concentration Brandron Information Additional form can be downloaded bars Specification for Family Child Care Registration. Ensure that they complete all forms that are required for the co-provider. This form can be downloaded bars Additional formation Additional formation Specification for Family Child Care Registration. Ensure that they complete all forms that are required for the co-provider. This form can be downloaded bars Specification Additional formation Figure Science Specification Additional formation Committee The Science Specification of Residents and Substitutes). This form can be downloaded bars Update Figure Committee The Science Specification Additional formation Committee The Science Specification of Residents and Substitutes). This form can be downloaded bars Update Figure Committee The Science Committee The Science	ditional Document Uploads tate of Manyland requires prospective child care providers to upload the following documents as part of their application for MSDE licensure. Please review the chart below to determine which documents apply to your y's application. Please note: PDP documents and photos are accested. The document size of each must be LGB or leas.		Applicant Status Applicant Information Address and Contact Information
Provider Information V All child crep organism must submit their Provider Information (Verification of Residents and Substitutes). This form can be downloaded <u>baces</u> Upload File	splication for Family Child Care Registration v rycu have a co-provider, they must also complete the Application for Family Child Care Registration. Ensure that they complete all forms that are required for the co-provider. This form can be downloaded <u>here</u> <u>also uses File</u> <u>b Uses File</u> <u>b His correctly prevent for this section. </u>		Address Verification Residence Information Other Institutes Living in the Reside Additional Information Additional Information Additional Document Uploads Sign & Submit
	vider Information video Information (Verification of Residents and Substitutes). This form can be downloaded <u>bares</u> Jobad Files Jobad Files		

- 30. Navigate to the location of the document with your system
- 31. Select the document and Click Open

🧿 Open						×
$\leftarrow \rightarrow \cdot \uparrow$	I → This	PC >	~	Ö		Documents
Organize 🔻 🕴	New folder					•
		Name	Date modified 🗸	Туре		Size
Quick access Desktop	*	Application for Child Care.pdf	4/6/2022 11:37 AM	Adobe	e Acrobat Document	
Downloads Documents	- * * - *					
Not the second s	*					
🤙 This PC						
Network						
						,
	File nan	ne: Application for Child Care.pdf		~	Custom Files (*.jpg;*.jp	:g;*.png ∨
					Open	Cancel

- 32. Repeat steps 30-32 until all documents are uploaded
 - a. If you need to remove an uploaded file, select the trash can icon next to the upload timestamp.

Floor Plans	~
All child care programs are required to submit a comprehensive floor plan that may include the following items: architectural details such as columns, built-ins, etc.; the relation of the space to ground level; room numbers, if available; ages of children who will occupy rooms, if known; corridors or walloways; walls or partitions; doors and door swings; windows; stairways; restrooms with fixtures; food preparation area with equipment; storage areas; office areas. The plan must indicate if any changes are being made to the facility – i.e., addition of toilets, sinks, drinking fountains, walls, etc. If the room is a large open space, then the plan must indicate how the space will be used if more than one group of children will be accommodated.	
L Upload Files Or drop files	
Floor Plan.pdf 4/18/2023, 11:43 AM	

Other Documents		~
If any other documents are requested by your Regional Licensing Office that do not fit into one of the above categories, please upload those documents here		
Upload Files Upload Files Or drop files		
Other Documents.pdf	4/18/2023, 09:39 AM	a
Exit		Save & Continue

34. *Review* the acknowledgement Statement *and check* the Acknowledgement Box

35. Click Save & Submit

-amily Child Care Home Application			50	cps
Sign & Submit			٩	Instructions
			•	Applicant Status
				Applicant Information
understand the regulations can be viewed and printed from the following website:				Address and Contact Information
ttps://earlychildhood.marylandpublicschools.org/regulations			I	
			Ŷ	Address Verification
have read the regulations for Family Child Care Registration, COMAR 13A.15.01. If I am r	egistered, I agree to abide by those regulations, which include (but are not limited to) the fi	ollowing requirements:	•	Residence Information
				Other Individuals Living in the Residence
. Display the registration certificate in a conspicuous place;				Additional Information
Maintain my assigned capacity;			I	
Ensure that supervision of the children in care is provided at all times;			°	Additional Document Uploads
I. Report to the appropriate authorities all suspected cases of child abuse and neglect; Report to the Office of Child Case (OCC) all earliest loweles and doubted to the lower three thirds.	In my const		ò	Sign & Submit
Neport to the Omot or Child Care (OCC) all senious injuries and deaths involving childre	in my care,			
Connerate in any investigation regarding my application or registration				
Permit unannounced visits by the OCC:				
Maintain all required records;				
Give or advise parents how to pursue the Consumer Education Pamphlet;				
Execute a written agreement with each parent or guardian; and				
Report to the OCC all changes which might affect the status of the registration.				
I understand that I must submit all documents required by the OCC to the Regional OF	ins before my application can be approved. The information i have shap on this entire and	ication form and on all other required		
pplication documents is true, correct, and complete to the best of my knowledge. I unders	tand that submitting an application is not an authorization to provide childcare services. I	inderstand that I may not operate a family		
hild care home until I receive a certificate of registration from the Office of Child Care. By	checking this box, I have read the acknowledgement and consent to the use of an electron	ic signature.		
Electronically Signed By	*Electronically Signed On Date			
Holly Frazer	04-18-2023	a		
	-			
	Convince .	for the set		

36. Click Go to Dashboard

Home Liberaring Application Informal Application Attendance & Investing Program Information	Scholarship Requests	Delegated Admin
Your application was successfully submitted. Please montor the lefter of the enail address that you used during registration for further communications from MSDE and updates on the status of your application.		
On to Databased		

37. View your Submitted Application on the Dashboard

	Home	Licensing Application	Informal Application	Attendance & Invoiding	Program Information	Scholarship Requests	Delegated Admin
Licensing Application Dashboard							
					5	itart New Application	
Unsubmitted Applications						>	
Submitted Applications						~	
Application Number: PAP0000001843							
Application Type: Application for You'ny Child Care Hone Registration License Type: Family Child Care Hone Registration Submittain Statuse: Submitted							
Suterit Additional Documents							

38. View the Message Center for any updates and/or Portal Notifications



Note: For additional support or answers to Frequently Asked Questions, review our Help & Frequently Asked Question Page.

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