

## STATE OF MAINE DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Child and Family Services

## Child Care Subsidy Program - Child Care Provider Information Sheet

*Please have your Child Care Provider complete this form*			
Child Care Provider Responsible for Completion			
1.	Parent Name:		
2.	Child(ren's) Name(s):		
3.	When is the child expected to attend your program?		
Provider Information			
1.	Business Name: Standish Parks & Recreation 2. What is your QRIS Step Level: License		QRIS Step Level: License Exempt provider
3.	Name of Contact Person: Gail Platts		<b>4.</b> Phone Number: 207 642 2875
5.	Address: 175 Northeast Rd, Standish, ME 04084		
6.	Email Address: gplatts@standish.org		
7.	Do you currently participate in the Maine's Quality Ratings and Improvement System? X Yes No		
8.	Provider Type: (select below)		
	Licensed License Number: 654922		
	<ul> <li>Must be 18 years old and may not reside at the same address as the child(ren); and</li> <li>Can only watch a maximum of two (2) children</li> <li>Must be a Maine resident for 6 months</li> </ul>		
	Check one:		
	In <u>Providers</u> Home: Unrelated Related (must indicate relationship to child)		
	In <u>Child's</u> Home:		
	School Age Program/Recreational		
By signing below you acknowledge that the Child Care Subsidy Program does not pay retroactively and the parent is responsible for all payments until you receive an award letter. If you are a new provider to the Child Care Subsidy Program you will be receiving additional			

paperwork that needs to be completed.

Providers Name (Print): Gail Platts (Standish Parks & Recreation) Preferred Language: English

DEBUTO

Provider's Signature:

Tel: (207) 624-7999

Date: 24 Dec 2023

\*Signature Required-Please sign, date and return to the following address:

**Department of Health and Human Services** Office of Child and Family Services **Child Care Subsidy Program** 2 Anthony Avenue 11 State House Station Augusta, ME 04333-0011

Fax: (207) 287-6308 Toll Free: 1-877-680-5866 TTY users call Maine relay 711

Email: CCSP.DHHS@Maine.gov