



Children First Follow-Up

Supporting Document

Review paper work, not any items that need corrected and assure they have been corrected. This follow-up reflects the condition of the home and CACFP requirement at the time of the follow-up.

	Item Needing Corrected	Must be corrected to validate CACFP requirement: Item Corrected
Fire Inspection		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
Health Inspection		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
Child Care Standards		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
DES/DHS		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
Other:		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N
		<input type="checkbox"/> Y <input type="checkbox"/> N

Child Care Provider Signature _____ **Date** _____

Staff Signature _____ **Date** _____