MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION FOR CHILD CARE REGULATION

CHILD CARE WORK EXPERIENCE

Send to: Section for Child Care Regulation Director Certification
P.O. Box 570
Jefferson City, MO 65102
CCDirectors@health.mo.gov

INSTRUCTIONS

- This form is used to document a director applicant's child related work experience needed to meet licensing rules.
- The experience must have been responsible, supervised, full-time (a minimum of 35 hours per week), paid experience in working with children in a child care setting. Part time experience may be prorated.
- Each month of full-time experience may be substituted for two (2) college semester hours in unspecified courses but **NOT for the required child related courses.**
- In-home experience must have been in a licensed family home. Facility DVN must be provided.
- Foster care and administrative work does not count toward experience credits.
- A Child Care Work Experience form must be submitted for each facility/employer.

NAME OF APPLICANT	SOCIAL SECURITY NUMBER		
NAME OF FACILITY/EMPLOYER	FACILITY DVN (LICENSE NUMBER)		
FACILITY ADDRESS	CITY	STATE	ZIP CODE
SUPERVISOR NAME	FACILITY TELEPHONE NUMBER ( )		
APPLICANT JOB TITLE	AGES OF CHILDREN SERVED		

DATE(S) OF EMPLOYMENT (DAY/MONTH/YEAR)

FROM:_____/_____/_____ TO:_____/_____/ _____

NUMBER OF HOURS PER WEEK	NUMBER OF MONTHS PER YEAR

EMPLOYEE'S JOB DUTIES (MAY ATTACH ADDITIONAL DOCUMENTATION)

THE INFORMATION SUBMITTED ON THIS FORM IS TRUE AND ACCURATE.

SIGNATURE OF APPLICANT	PRINTED NAME	DATE

SCCR OFFICE USE ONLY

TOTAL MONTHS OF CHILD CARE RELATED EXPERIENCE	COLLEGE CREDIT EQUIVALENCY