HOUR BY HOUR ENROLLMENT AND STAFFING SCHEDULE FOR GROUP CHILD CARE

ND DEPARTMENT OF HUMAN SERVICES/CFS

SFN 1130 (Rev. 9-2011)

Clear Fields

Provider:		
Address:		
Date Form Completed:		
New License:	Renewal:	Unannounced Review:
License Number:	Expiration Date:	Compliance: ☐ Yes ☐ No

TIME OF THE DAY (6 a.m. - 6 - p.m.)

AGE CATEGORY CHILD RATIO MAXIMUM GROUP SIZE	MAXIMUM NUMBER OF CHILDREN SCHEDULED PER DAY	6 a.m.	7 a.m.	8 a.m.	9 a.m.	10 a.m.	11 a.m.	12 Noon	1 p.m.	2 p.m.	3 p.m.	4 p.m.	5 p.m.	6 p.m.
Birth to 18 months Cannot Exceed Ratio 1:4 _____ X .25	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
18 months - 36 months Cannot Exceed Ratio 1:5 _____ X .20	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
3 Year Olds Cannot Exceed Ratio 1:7 _____ X .14	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
4 Year Olds Cannot Exceed Ratio 1:10 _____ X .10	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
5 Year Olds Cannot Exceed Ratio 1:12 _____ X .08	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
6 - 12 Year Olds Cannot Exceed Ratio 1:18 _____ X .05	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
Special Needs Children When More Than Usual Care Use Developmental Age	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
TOTAL	**NUMBER OF CHILDREN SCHEDULED**													
	NUMBER OF STAFF PRESENT													
	REQUIRED CAREGIVERS													

Provider:			
Address:			
Date Form Completed:			
New License:	Renewal:	Unannounced Review:	
License Number:	Expiration Date:	Compliance: ☐ Yes ☐ No	

TIME OF THE DAY (6 p.m. - 6 - a.m.)

AGE CATEGORY CHILD RATIO MAXIMUM GROUP SIZE	MAXIMUM NUMBER OF CHILDREN SCHEDULED PER DAY	6 p.m.	7 p.m.	8 p.m.	9 p.m.	10 p.m.	11 p.m.	12 Midnight	1 a.m.	2 a.m.	3 a.m.	4 a.m.	5 a.m.	6 a.m.
Birth to 18 months Cannot Exceed Ratio 1:4 _____ X .25	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
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	Number of Staff Present:													
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	Number of Staff Present:													
	Required Caregivers:													
Special Needs Children When More Than Usual Care Use Developmental Age	**Number of Children Scheduled:**													
	Number of Staff Present:													
	Required Caregivers:													
TOTAL	**NUMBER OF CHILDREN SCHEDULED**													
	NUMBER OF STAFF PRESENT													
	REQUIRED CAREGIVERS													