

Louisiana Department of Education
Child Care Assistance Program

CHECKLIST
In-Home Provider Renewal

Provider's Name

Provider Number

- Care is provided in child(ren)'s home Yes No
- Care is provided for 6 or fewer children in a private residence or facility Yes No
- Provider is a Family Child Care Provider. Provider must submit a Family Care Provider Packet. Proceed with checklist.

PART 1:

YOUR CCAP APPLICATION MUST BE ENTERED INTO THE CAFÉ ONLINE SYSTEM located on our website www.louisianabelieves.com. Click on the heading, Early Childhood, CCAP Provider Certification, then "**For Existing CCAP Providers**".

The online application includes entries for your registration form, provider agreement and if changes, provider rate agreement, W-9 tax information and direct deposit information.

PART 2:

The following required information must be submitted by the due date indicated on the renewal letter you received from LDE. Items may be uploaded via CAFÉ, faxed to us at 225-342-4180 or mailed to the following address: CCAP Provider Certification, P. O. Box 2510, Baton Rouge, LA 70821:

- Copy of a current Fire Marshal Inspection Report.
- Social Security Card (copy)
- Residence Verification (Verification of physical address. Provider cannot live in child's home)
- Age Verification

- Current Infant, Child and Adult CPR Verification Expires On: _____
If verification is not provided, indicate reason:
 - Class taken but card not yet received.
 - Class is scheduled. Date of class: _____
 - Other: _____

- Current verification of Pediatric First Aid Training Expires On: _____
If verification is not provided, indicate reason:
 - Class taken but card not yet received.
 - Class is scheduled. Date of class: _____
 - Other: _____

- A CCAP 16E, Criminal Background Check Authorization form completed for **each** of the following: the provider, any adult living at the location where care is provided, any adult employed at, or any adult employed on the property where care is being provided (this does not include the parents/caregivers). NOTE: Complete two (2) sets for each person, one to submit with your CCAP application and one set to keep until Provider Certification staff notifies you to go to your local Sheriff's office to obtain the Live Scan.