



# In-Home Child Care Request

Please complete this packet and return it to \_\_\_\_\_  
\_\_\_\_\_

Return by: \_\_\_\_\_. This packet will help SRS determine your eligibility for In-Home child care subsidy.

**For Agency Use Only:** \_\_\_\_ Initial Request \_\_\_\_\_ Review due \_\_\_/\_\_\_/\_\_\_

**Parent completes the following (Please Print):**

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

FEIN: \_\_\_\_\_ Verification Attached: Yes \_\_\_\_\_ No \_\_\_\_\_

The In-Home provider is an employee of the parent. Parents must contact the Internal Revenue Service (IRS) regarding their responsibilities as an employer and to obtain a Federal Employer's Identification Number (FEIN):

Primary Language: Spoken \_\_\_\_\_ Written \_\_\_\_\_

Consent to Medical Care verification: Yes \_\_\_\_\_ No \_\_\_\_\_

**Provider completes the following (Please Print):**

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Any other Name(s) used (Past or Present): \_\_\_\_\_

Primary Language Spoken: \_\_\_\_\_ Written: \_\_\_\_\_

## Kansas Department of Social & Rehabilitation Services Economic & Employment Support

DISTRIBUTION: File, Parent

## DEFINITION

An In-Home child care provider must meet the following criteria:

- Is not the child's own parent, guardian, or primary caretaker;
- Provides care in the **child's home**;
- Provides care less than 24 hours per day;
- Is not a member of the child's household; and
- Is at least 18 years of age

The In-Home provider is an employee of the parent. Parents must contact the Internal Revenue Services (IRS) regarding their responsibilities as an employer.

See "In-Home Child Care Handbook" for more information.

SRS benefits will be issued directly to the parent. **The parent is responsible for paying the provider for the full cost of care, even if the SRS benefit is less, and for providing the necessary information for filing taxes.**

## CHILD ABUSE/NEGLECT REGISTRY CHECK

SRS records are checked for any history of child abuse or neglect. The provider must be approved before benefits will be issued to the parent for the provider's services. An annual review must be completed for benefits to continue.

**PARENT:** The provider's signature on page 5 of this request gives SRS permission to release information to you about the provider. Your signature on page 4 of this request is your agreement to keep confidential any information you may receive.

**PROVIDER:** By signing this request on page 5, you give SRS permission to release any information about you to the parent. Any information released is for the exclusive and confidential use by the parent. If you wish to receive written notice of the results of the registry check, you must request it from SRS.

## **FURTHER ACKNOWLEDGMENTS**

An in-home provider shall provide care only for the children indicated in this agreement. Caring for any other children would require a separate agreement.

The state uses the Electronic Benefit Transfer (EBT) System for payment. Benefits are put on the eligible parent's EBT Vision card. Parents then transfer benefits to eligible providers as payment for services. Parents are not to give their EBT cards or PINs (personal identification numbers) to providers, and providers are not to accept them. It is the responsibility of the parent - not the provider - to manage and use these benefits.

All overpayments are subject to recovery. Recovery may be from, but not limited to, direct payment back to SRS or the State Debt Set-off program.

Accurate records of daily attendance must be maintained, and cooperation with audits is required.

**HEALTH AND SAFETY STANDARDS  
Home Checklist**

**INSTRUCTIONS:** To be completed by parent and provider during a walk-through inspection of the home where care will be provided. The signatures below certify that a walk-through inspection has been conducted by both parties, the parent is fully responsible if standards are not met or maintained, and they have discussed health and safety standards with each other.

Address where care will be provided: \_\_\_\_\_

**CHECK LIST:**

- | Yes | No  | N/A* |  |
|-----|-----|------|--|
| ___ | ___ | ___  | Medications, household poisons, dangerous substances and instruments are out of reach or locked up.                |
| ___ | ___ | ___  | Food and household products stored separately.   |
| ___ | ___ | ___  | Home clean, uncluttered and safe.  |
| ___ | ___ | ___  | Exits free from trash and other materials.   |
| ___ | ___ | ___  | Electrical outlets covered with safety caps if children are under 5 years.   |
| ___ | ___ | ___  | Guns in locked storage or trigger locks installed.   |
| ___ | ___ | ___  | Toys and play equipment clean and safe.  |
| ___ | ___ | ___  | Working telephone at the home during all hours that the children are in care, and emergency numbers posted nearby. |
| ___ | ___ | ___  | Stairways railed and guarded if children are under 2-1/2 years.  |
| ___ | ___ | ___  | Outside play area fenced or adult supervised; area free from trash and other dangerous objects.                    |
| ___ | ___ | ___  | Outside equipment anchored and in good repair.   |
| ___ | ___ | ___  | Develop and discuss emergency plans in case of tornado, fire, storms and flood.                                    |
| ___ | ___ | ___  | Post emergency procedures in case of accident.   |
| ___ | ___ | ___  | Signed Emergency Medical Release forms (Consent for Medical Care) for children on file in home.                    |
| ___ | ___ | ___  | Smoke alarms installed and working properly.   |
| ___ | ___ | ___  | Smoke free policy in effect during hours of care.  |
| ___ | ___ | ___  | SRS Discipline Policy has been discussed and is understood.  |

**\*If N/A please explain:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Provider's Signature: \_\_\_\_\_

**POLICY STATEMENT ON DISCIPLINE  
SRS Child Care Providers**

The following are some examples of unacceptable forms of discipline:

**Humiliating, frightening or physically harming** a child;

**Punishing such as spanking (with the hand or any object), slapping, shaking, swatting pulling hair, dunking, yanking the arm** or anything similar;

**Making verbal remarks** using sarcasm, put-downs, verbal cuts, derogatory remarks, any other verbal abuse, and threats about the child or the child's family.

**Binding or tying** to restrict movement, or **enclosing** in a confined space such as a closet, locked room, furniture, box or cubicle;

**Withholding or forcing** foods or liquids;

**Placing substances which sting or burn** on any of a child's body parts.

It shall be the policy of the Department of Social & Rehabilitation Services not to purchase or continue to purchase services from providers who use unacceptable discipline.

Discipline is an essential part of child rearing, and when used positively it contributes to the healthy growth and development of a child. Positive discipline establishes acceptable patterns of behavior that promote behaviors beneficial to the child's development and welfare. It changes or eliminates behaviors which are injurious to the child's well-being. Positive discipline is encouraged as an important part of child rearing for children and youth for whom the Department of Social & Rehabilitation Services purchases and/or provides services and care.

Positive discipline, when used for purposes of guiding and teaching the child, provides to the child encouragement, a sense of satisfaction, and it helps the child understand the consequences of behavior. Effective, positive discipline imposes behavioral limits on the child which can provide a sense of security, a respect for order, and enable the child to predict and understand surroundings. Positive discipline effectively enlists the child's help rather than locking the child and adult into a power struggle or adversarial, punishing relationship. Positive discipline promotes the child's discovery of those values that will be of the greatest benefit to the child, both now and in the future.

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**Signatures**

***I acknowledge that I have read and understand the policies and criteria contained in this In-Home Child Care Request and agree to all conditions herein.***

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Provider Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>For Agency Use Only:</b>
<u>Central Registry Information</u>
Validated/Confirmed report of abuse/neglect on file in the Central Registry: Yes _____ No _____ Checked by: _____ Date: _____ (Name of Staff)
Signature of SRS Staff (if different than above) _____ Date: _____