CHILD PLACING AGENCY INITIAL CHECKLIST

An agency shall submit the following documents to the division along with the application: ☐ Documentation of the legal basis for operation; ☐ A certified copy of the current Articles of Incorporation; \square A copy of the current by-laws; \square A list of the names and addresses of the current members of the governing board and a notarized letter of acceptance from each; ☐ A completed personnel report on a form prescribed by the division; Verification of the education, experience, and character of the administrator, all professional staff, and all contracted personnel; \square Verification of a physical examination for all staff working directly with children, completed by a licensed physician or a registered nurse who is under the supervision of a licensed physician; ☐ Certification that all individuals who are required to complete a Background Check are eligible for employment or presence at the Child Placing Agency as required in §210.493 RSMo and 13 CSR 35-71.015 [Results of a check of the Child Abuse and Neglect Central Registry Unit (CA/N CRU) for all staff and volunteers]; A criminal records check for each employee from a state law enforcement agency; \square A chart depicting the agency's organizational structure and lines of supervision; \Box A proposed budget for a period of not less than twelve (12) months duration which shows both anticipated expenses and income for the period; ☐ An itemized schedule of all fees to be assessed to applicants; ☐ Verification of availability of not less than ninety (90) days operating capital; \square A copy of the Civil Rights Agreement signed by the president of the governing board or the agency director; \Box An outline of the agency's proposed program and the specific geographic area to be served (this shall be directly related to the number of staff and the geographic area to which it can actually provide services); \square A projected staffing plan for the anticipated capacity and programming of the agency; \Box A written statement clearly setting forth the authority and responsibilities delegated to a director, administrator, or supervisor, if other than the owner. When the responsibility for the operation of an agency rests with the governing board, that governing board shall establish written policies and procedures which clearly establish the lines of responsibility governing the operation of the agency. These shall include a statement of the kind and extent of authority delegated to the director employed to carry out the program; \Box A written description of intake policies which delineates the types of services to be provided, specific programs offered, and the methods of care and treatment to be provided; ☐ Job title, job description, and minimum qualifications for all staff; ☐ Written child abuse and neglect reporting policy; ☐ Written personnel practices, including staff training and orientation;

Email one copy of the completed forms and attached information with the application to:
☐ Proof of professional and commercial general liability insurance.
\square A written plan for all foster parent training; and
\square A written statement of any religious practices or religious restrictions;
\square Written health care policy for children in care which shall include preventive, medical, eye, hearing, and dental care;
\square Written visitation policy for children in care;
☐ Written discipline policy for children in care;

CD.ChildPlacingApps@dss.mo.gov

P.O. BOX 88 JEFFERSON CITY, MO 65103

IILD PLACING AGENCY

We hereby submit this application to the Department of Social Services, Children's Division, for a license to operate a child placing agency in the State of Missouri. We agree to abide by all laws and regulations governing the licensure and operation of a child placing agency in the State of Missouri. LEGAL NAME OF AGENCY TELEPHONE NUMBER FAX NUMBER EMERGENCY CONTACT TELEPHONE NUMBER AGENCY WEB SITE AGENCY E-MAIL PHYSICAL ADDRESS (STREET NUMBER, CITY, COUNTY, ZIP CODE) MAILING ADDRESS (STREET NUMBER, CITY, COUNTY, ZIP CODE) OWNER NAME MAILING ADDRESS **EMAIL ADDRESS** PHONE NUMBER CHIEF EXECUTIVE NAME MAILING ADDRESS **EMAIL ADDRESS** PHONE NUMBER EXECUTIVE DIRECTOR MAILING ADDRESS **EMAIL ADDRESS** PHONE NUMBER ADMINISTRATOR NAME MAILING ADDRESS **EMAIL ADDRESS** PHONE NUMBER BOARD PRESIENT NAME MAILING ADDRESS **EMAIL ADDRESS** PHONE NUMBER **BOARD CHAIR PERSON** NAME MAILING ADDRESS **EMAIL ADDRESS** PHONE NUMBER MAXIMUM NUMBER OF CHILDREN TO RECEIVE CARE AGES OF CHILDREN TO RECEIVE CARE SEX OF CHILDREN TO RECEIVE CARE ☐ Male ☐ Female ☐ Both NAME AND ADDRESS OF SCHOOL ATTENDED BY THE CHILDREN SERVICES TO BE PROVIDED ☐ Basic Core Maternity/Infant/Toddler/Preschool Residential Treatment ☐ Intensive Residential Treatment CONDUCTED UNDER OF THE AUSPICES OF (NAME OF SPONSORING ORGANIZATION, IF APPLICABLE) ADDRESS DATE ORGANIZED DATE INCORPORATED STATE OF INCORPORATION Non-Profit ☐ For Profit **CURRENTLY ACCREDITED BY** Council on Accreditation of Services for Children and Families, Inc ☐ Joint Commission on Accreditation of Healthcare Organizations Commission on Accreditation of Rehabilitation Facilities Not Accredited ORIGINAL ACCREDITATION DATE **CURRENT TERM OF ACCREDITATION** IS THERE ANY PENDING LEGAL ACTION AGAINST THE AGENCY, ANY BOARD MEMBER OR ANY STAFF MEMBER INVOLVING THE OPERATION OF THE AGENCY? Yes No If Yes, please explain on a separate page. PLEASE LIST ANY OTHER STATE AGENCIES THAT LICENSE YOUR ORGANIZATION

THEREOF SHALL BE GUILTY OF A CLASS A MISDEMEANOR. IN CASE SUCH GUILTY PERSON BE A CORPORATION, ASSOCIATION, INSTITUTION OR SOCIETY, THE OFFICERS THEREOF WHO PARTICIPATE IN THE ACTIVITY SHALL UPON CONVICTION BE SUBJECT TO THE PENALTIES PROVIDED BY LAW. § 210.531 RSMo. ANY PERSON IS GUILTY OF A CLASS B MISDEMEANOR IF SUCH PERSON SUBJECT TO BACKGROUND CHECK REQUIREMENTS KNOWINGLY FAILS TO COMPLETE A BACKGROUND CHECK, AS DESCRIBED UNDER §§ 210.493 AND 210.1263. §210.1283 RSMo. I hereby certify that officers, managers, contractors, volunteers with access to children, employees and other support staff of the child placing agency, and owners who will have access to the facilities have, or will have, completed Background Checks and have been found eligible as required in § 210.493 and 13 CSR 35-71.015.		
TITLE		

NOTE: MISSOURI LAW PROVIDES THAT ANY PERSON WHO VIOLATES ANY APPLICABLE PROVISION OF SECTIONS 210.481 TO 210.536, OR WHO

MO 886-3161 (7-2021)