

MARYLAND STATE DEPARTMENT OF EDUCATION – Office of Child Care
REQUEST FOR CONTINUING LARGE FAMILY CHILD CARE HOME REGISTRATION

FACILITY: _____ **REGISTRATION #:** _____

The above-named facility's large family child care registration is due to expire on _____

Please check your preference below and return to:

Licensing Specialist _____ **Phone** _____

Address: _____

Email: _____

I desire to continue to provide child care beyond the expiration date of my large family child care home registration and hereby submit the required documentation for conversion of my current registration to continuing (non-expiring) status. I agree to continue to abide by the requirements of COMAR 13A.18.01-.16. I understand that reporting false information may be grounds for denial or revocation of my large family child care home registration.

Signature _____ **Date** _____

I will not continue to provide child care beyond the expiration date of my large family child care home registration. I will voluntarily close my large family child care home by the above-noted expiration date and will return my certificate of registration to the Office of Child Care.

Signature _____ **Date** _____