

# Appendices

# **Links to Sources and Documents Referenced in Report**

## Links/works cited in report:

- Maryland Family Network's Maryland Child Care Demographics:  
<http://www.marylandfamilynetwork.org/demographics/>
- Child Care Aware of America, Maryland Cost of Care Report:  
(<https://usa.childcareaware.org/wp-content/uploads/2018/10/Maryland2018.pdf>)
- Maryland Department of Commerce, Brief Economic Facts, 2018:  
<http://commerce.maryland.gov/Documents/ResearchDocument/BriefEconomicFactsMaryland.pdf>
- Brain growth in the first five years, Anatomical Brain Magnetic Resonance Imaging of Typically Developing Children and Adolescents,  
[https://jaacap.org/article/S0890-8567\(09\)60063-0/fulltext](https://jaacap.org/article/S0890-8567(09)60063-0/fulltext)
- More information on regulated child care in Maryland can be found at:  
<https://earlychildhood.marylandpublicschools.org/child-care-providers/regulations>
- MSDE Scholarship program:  
<https://earlychildhood.marylandpublicschools.org/child-care-providers/child-care-scholarship-program>
- Child Care Scholarship Program (formerly Child Care Subsidy Program) rates:  
<https://earlychildhood.marylandpublicschools.org/families/child-care-subsidy-program/child-care-scholarship-rates>

**Cover Letter and  
Information on  
Maryland 2019  
Market Rate Survey**



Dear Child Care Professional:

Maryland's child care provider organizations work to better the field of early care and education, including work to increase funding to make high quality programs available and affordable for all families. On behalf of MSDE Office of Child Care we are asking that you complete the Market Rate Survey (please see the link below). The information you provide is very important for determining the child care scholarship rates (formerly child care subsidy) for each region in the state. The great news is that with the increased income guidelines, more families than ever are eligible to receive scholarship money to help offset the cost of childcare. How does this affect you? By completing the Market Rate Survey you are helping to determine the true cost of child care across the state. Even if you do not accept child care scholarships your information matters for determining scholarship rates. This information will be used to make critical policy decisions by state legislators who determine the rates of reimbursement.

Please complete the survey below in paper form or online by March 29, 2019 by following the link below:

<https://locate.marylandfamilynetwork.org/Provider/login>

*Your responses will be confidential and will only be used to determine an overall picture of what programs are charging for child care tuition.*

Please note that

- The survey has been simplified. It should take no more than 2 minutes to complete.
- OCC will offer one (1) Professional Activity Unit (PAU) for those individuals completing the survey.

Once the surveys are completed, OCC will analyze the data to determine the true cost of quality care including the resources necessary to attract and retain the best possible teachers and staff for all child care programs.

Individuals completing the survey for their programs will receive 1 PAU toward the Maryland Child Care Credential.

Have Questions or Need Assistance?

Please reach out to any of the association leaders listed below.

**Maryland State Child Care Association**

Chris Peusch, Executive Director, [MSCCA1@comcast.net](mailto:MSCCA1@comcast.net)

**Maryland State Family Child Care Association**

Jacqueline Grant, President, [jacqueline.n.grant@gmail.com](mailto:jacqueline.n.grant@gmail.com)

**Maryland Association for the Education of Young Children**

Christina Lopez, Co- President, [christina.lopez@mdaeyc.org](mailto:christina.lopez@mdaeyc.org)

**Service Employees International Union Local 500**

Crystal Barksdale, Family Child Care Representative, [Barksdale714@gmail.com](mailto:Barksdale714@gmail.com)

**Maryland Family Network/Maryland Child Care Resource Network**

Steve Rohde/Lacey Tsonis [MCCRNinfo@marylandfamilynetwork.org](mailto:MCCRNinfo@marylandfamilynetwork.org).

Thank you for taking the time to help providers, families and children!



**MARYLAND  
FAMILY  
NETWORK**





**MARYLAND CHILD CARE ORGANIZATIONS  
SUPPORTING  
CHILDREN AND CHILD CARE PROVIDER  
INITIATIVES**

**TEAM  
WORK!**



**Long Format Form of  
Maryland 2019  
Market Rate Survey**



# LOCATE: CHILD CARE GROUP PROGRAM QUESTIONNAIRE



**Instructions:** Please complete a separate questionnaire for each licensed program facility/site which you operate. Follow all instructions carefully to insure accurate information is maintained on your facility and program. This questionnaire is for many different kinds of programs. If the question does **not** apply to you, indicate with a "NR" (not relevant) in the space provided. If you have any questions, please call the LOCATE staff at 410.659.7701 X 234. Return the completed questionnaire to Maryland Family Network, 1001 Eastern Ave., Fl 2, Baltimore, Maryland 21202.

**PLEASE PRINT**

Date \_\_\_\_\_

Name \_\_\_\_\_

License Number (for identification purposes only) \_\_\_\_\_

Do you participate in Maryland EXCELS?  Yes  No

Child Care Type:  Child Care Center  Letter of Compliance Facility

Site Address \_\_\_\_\_ Director \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_

Zip \_\_\_\_\_ Landline Phone \_\_\_\_\_

Mailing Address (if different from site address) \_\_\_\_\_ Cell Phone \_\_\_\_\_

\_\_\_\_\_ Fax \_\_\_\_\_

\_\_\_\_\_ E-mail \_\_\_\_\_

**FEES AND ADDITIONAL INFORMATION**

Please complete the following information for each age group served. Do not include discounts

AGE Group	Full Time (weekly)	Part-Time (weekly)	Before/After School (daily)	Drop-In (daily)	Evening (daily)	Overnight (daily)	Weekend (daily)
6 wks. – 11 mon.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
12 mon. – 23 mon.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
2 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
3 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
4 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
5 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
School-Age (5+)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Do you charge a Security fee?	<input type="checkbox"/> No		<input type="checkbox"/> Per child <input type="checkbox"/> Per Family	Annually: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you charge a Registration fee?	<input type="checkbox"/> No		<input type="checkbox"/> Per child <input type="checkbox"/> Per Family	Annually: <input type="checkbox"/> Yes <input type="checkbox"/> No			

I DO WANT my fees published

I DO NOT WANT my fees published on any website.



4. a. Please circle all that you provide:
- |   |     |    |
|---|-----|----|
| Before and/or after elementary school care  | Yes | No |
| Before and/or after middle school care  | Yes | No |
| Before and/or after preschool program ( <i>nursery, part-day, Head Start and Early Head Start</i> ) | Yes | No |
- b. Please circle all that apply if you offer any before and/or after school care:
- |   |     |    |                 |     |    |
|---|-----|----|-----------------|-----|----|
| Center staff will walk/drive children to/from: school | Yes | No | school bus stop | Yes | No |
| Children can walk to/from: school                     | Yes | No | school bus stop | Yes | No |
5. a. What time do you open? \_\_\_\_\_ Close? \_\_\_\_\_
- b. Are you willing to adjust the opening and closing hour to accommodate a parent's needs? Yes No
6. Please check the days of the week that you are regularly open:
- Sun \_\_\_ Mon \_\_\_ Tues \_\_\_ Wed \_\_\_ Thurs \_\_\_ Fri \_\_\_ Sat \_\_\_
7. a. Do you offer care: \_\_\_\_\_ Full time? \_\_\_\_\_ Part-time? \_\_\_\_\_ Both?
- b. Do you offer infant care: \_\_\_\_\_ Full time? \_\_\_\_\_ Part-time? \_\_\_\_\_ Both?
8. Are you open:
- \_\_\_\_\_ 9 or 10 months (closed in summer) \_\_\_\_\_ 12 months (year-round)
- \_\_\_\_\_ Summer only \_\_\_\_\_ During school vacations
9. Please circle yes or no for each of the following schedules. (Please send a copy of your license if you offer **overnight** care. This must be reflected on your license). Do you offer:
- |                            |     |    |                     |     |    |
|----------------------------|-----|----|---------------------|-----|----|
| Weekend (on regular basis) | Yes | No | Temporary/emergency | Yes | No |
| Drop-in care               | Yes | No | Overnight           | Yes | No |
| Rotating schedule          | Yes | No |                     |     |    |
10. Will you toilet train or assist with toilet training toddlers except where a disability prevents toilet training? Yes No
11. Will you administer prescribed medication with written permission? Yes No
12. Does anyone on your staff speak more than one language fluently? Yes No
- If yes, which language(s): \_\_\_\_\_
13. Please check the meals that you provide:
- |                  |                       |
|------------------|-----------------------|
| _____ Breakfast  | _____ P.M. snack      |
| _____ A.M. snack | _____ Dinner          |
| _____ Lunch      | _____ No meals/snacks |
14. Are you willing to accommodate a special diet for a child? Yes No
15. Due to concerns of severe food allergies, is your center/program a peanut/nut-free environment? Yes No
16. If you have an MSDE/OCC-approved nursery school or private kindergarten, please provide your monthly fees here:
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The information you provide for Questions 25- 32 are for statistical purposes only, and will not be available as part of your referral information to parents. Your information is combined with the information of other caregivers in order to study trends in the areas of compensation and benefits.

24. a. Please complete the following chart.

POSITION	NUMBER OF PAID STAFF	AVERAGE ANNUAL FULL-TIME GROSS SALARY	AVERAGE ANNUAL PART-TIME GROSS SALARY
Directors			
Teachers/Senior Staff			
Aides			
Other			
Total Staff			

b. Do you provide benefits? Yes No  
 If yes, please check the benefits you provide:

	FULLY PAID	PARTIALLY PAID	AVAILABLE BUT NO EMPLOYER CONTRIBUTION
Pre-Employment Costs (i.e. physical, FBI check)			
Health Insurance			
Dental Insurance			
Life Insurance			
Other (Specify): _____			

**SPECIAL NEEDS**

25. Do you currently have a child or children with special needs or disabilities enrolled in care?  
 Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_
26. Do you currently have a child or children in care who are receiving early childhood mental health services or behavioral consultation services?  
 Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_
27. Do you currently have a child or children in care who are receiving early intervention services from Infant and Toddlers or Child Find other than mental health services?  
 Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_
28. Have you ever referred a child or children for early intervention services?  
 Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_
29. Have you ever referred a child or children to a behavior consultant?  
 Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_
30. Did you terminate the care of a child due to behavior problems between January 1, 2017 and December 31, 2017?  
 Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_



31. a. Have you had experience caring for children or adults with disabilities (child care, family and/or community activities)? Yes No

b. If yes, please check which disabilities you have had experience with or knowledge of:

<b>Cognitive</b>		<b>Physical</b>	
<input type="checkbox"/> Delayed Development	<input type="checkbox"/> Learning Disability	<input type="checkbox"/> Arthritis	<input type="checkbox"/> Low Muscle Tone
<input type="checkbox"/> Down Syndrome	<input type="checkbox"/> Speech/Language Delay	<input type="checkbox"/> Cerebral Palsy	<input type="checkbox"/> Muscular Dystrophy
<input type="checkbox"/> Fragile X	<input type="checkbox"/> Traumatic Brain Injury	<input type="checkbox"/> Hearing/Vision Loss	<input type="checkbox"/> Orthopedic
<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Other _____	<input type="checkbox"/> Limited Mobility (requires a wheelchair)	<input type="checkbox"/> Spina Bifida
			<input type="checkbox"/> Other _____
<b>Medical</b>		<b>Social/Emotional</b>	
<input type="checkbox"/> Apnea Monitor	<input type="checkbox"/> Heart Problems	<input type="checkbox"/> Adjustment Disorder	<input type="checkbox"/> Emotional Problems
<input type="checkbox"/> BPD	<input type="checkbox"/> HIV+/AIDS	<input type="checkbox"/> Attachment Disorder	<input type="checkbox"/> Mood Disorder
<input type="checkbox"/> Blood/Organ Disorder	<input type="checkbox"/> Hydrocephalus	<input type="checkbox"/> ADD(Attention Deficit Disorder)	<input type="checkbox"/> Obsessive-Compulsive Disorder
<input type="checkbox"/> Bowel Disorder	<input type="checkbox"/> Lead Poisoning	<input type="checkbox"/> ADHD (Attention Deficit Hyperactivity Disorder)	<input type="checkbox"/> ODD (Oppositional Defiant Disorder)
<input type="checkbox"/> Cancer	<input type="checkbox"/> Prematurity	<input type="checkbox"/> Autism Spectrum	<input type="checkbox"/> Post-Traumatic Stress Disorder
<input type="checkbox"/> Colostomy Bags	<input type="checkbox"/> Reflux	<input type="checkbox"/> Behavior Problems	<input type="checkbox"/> Sensory Integration Dysfunction
<input type="checkbox"/> Cystic Fibrosis	<input type="checkbox"/> Respiratory	<input type="checkbox"/> Bipolar Disorder	<input type="checkbox"/> Social Communication Disorder
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Severe Allergies	<input type="checkbox"/> Depression	<input type="checkbox"/> Other _____
<input type="checkbox"/> Drug Addicted/ Exposed Newborns	<input type="checkbox"/> Severe Asthma		
<input type="checkbox"/> Feeding Problems/ GI Tubes	<input type="checkbox"/> Seizure Disorder		
<input type="checkbox"/> Genetic Disorder	<input type="checkbox"/> Sickle Cell		
<input type="checkbox"/> Other _____	<input type="checkbox"/> Trach Tube		

c. Please circle all that apply to your program:  
 Currently wheelchair accessible (ex.: ramp or garage entry, etc.) Yes No  
 Working knowledge of sign language Yes No

**EDUCATION**

32. a. Please indicate the number of your staff who have completed the following levels of education:

\_\_\_\_\_ Less than High School    \_\_\_\_\_ Associate Degree    \_\_\_\_\_ Master Degree  
 \_\_\_\_\_ GED/High School    \_\_\_\_\_ Bachelor Degree    \_\_\_\_\_ Doctoral Degree

b. If you have staff with Associate Degrees or higher, please check the major areas of study:

Child Development  
 Early Childhood Education  
 Elementary Education  
 Family Studies  
 Nursing  
 Psychology  
 Social Work  
 Special Education  
 Other \_\_\_\_\_

33. Has anyone on your staff completed college level credit courses in Child Development or Early Childhood Education?  
Yes No

34. a. Has anyone on your staff completed college level credit courses in Special Education?  
Yes No

b. Does anyone on your staff have a teaching certificate in Special Education issued by Maryland State Department of Education?  
Yes No

**TRAINING**

35. Do you have staff who have completed any of the following certifications:

- a. 90 Hour Early Childhood Education Pre-service Certificate  Yes  No
- b. 45 Hour Infant and Toddler Pre-service Certificate  Yes  No
- c. 45 Hour School Age Group Leader Certificate  Yes  No

36. Please list any trainings taken by your staff relating specifically to care for children with disabilities.

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37. Does anyone on your staff have any type of training in the medical field?  Yes  No  
If yes, please list the areas, such as nursing assistant, practical nurse, hospital or medical aide, etc.

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38. Does your center follow any of the following State-approved curricula?

- InvestiGator-Club (ages 3, 4 & 5)*
- Frog Street Preschool (age 4)*
- Little Treasures (age 4)*
- DLM Early Childhood Express (ages 3 & 4)*
- Kinder Corner and Curiosity Corner (ages 4 & 5)*
- Creative Curriculum for Preschool (ages 3 & 4)*
- Creative Curriculum for Family Child Care (ages 3, 4 & 5)*
- None of the above

39. a. If you don't follow a State-approved curriculum, do you follow any pre-school curriculum? Yes No  
b. If yes, what is the name of the curriculum that you follow?

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**MARYLAND  
FAMILY  
NETWORK**

# LOCATE: CHILD CARE FAMILY CHILD CARE QUESTIONNAIRE



**Instructions:** Please answer the following questions regarding your family child care home. If there is information you do not wish to share or you feel does **not** apply to you, please indicate with a "NR" (not relevant) in the space provided. If you have any questions or concerns about the questionnaire, feel free to call the LOCATE staff at 410.659.7701 x234. Please return the completed questionnaire by email to [mmoyd@marylandfamilynetwork.org](mailto:mmoyd@marylandfamilynetwork.org), by mail to Maryland Family Network, 1001 Eastern Ave. Fl 2, Baltimore, Maryland 21202 or, you can fax the completed form to 410.385.0561.

**PLEASE PRINT**

Date \_\_\_\_\_

Name \_\_\_\_\_

License Number (for identification purposes only) \_\_\_\_\_

Do you participate in Maryland EXCELS?  Yes  No

Child Care Type:  Family Child Care Home  Large Family Child Care Home

Site Address \_\_\_\_\_ Community/Development \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_

Zip \_\_\_\_\_ Landline Phone \_\_\_\_\_

Mailing Address (if different from site address) \_\_\_\_\_ Cell Phone \_\_\_\_\_

\_\_\_\_\_ Fax \_\_\_\_\_

\_\_\_\_\_ E-mail \_\_\_\_\_

**FEES AND ADDITIONAL INFORMATION:**

Please complete the following information for each age group served. Do not include discounts

AGE Group	Full Time (weekly)	Part-Time (weekly)	Before/After School (daily)	Drop-In (daily)	Evening (daily)	Overnight (daily)	Weekend (daily)
6 wks. – 11 mon.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
12 mon. – 23 mon.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
2 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
3 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
4 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
5 years	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
School-Age (5+)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Do you charge a Security fee?	<input type="checkbox"/> No		<input type="checkbox"/> Per child <input type="checkbox"/> Per Family		Annually: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you charge a Registration fee?	<input type="checkbox"/> No		<input type="checkbox"/> Per child		Annually: <input type="checkbox"/> Yes <input type="checkbox"/> No		



6. a. Do you offer care: \_\_\_\_\_ Full time? \_\_\_\_\_ Part-time? \_\_\_\_\_ Both?

b. Do you offer infant care: \_\_\_\_\_ Full time? \_\_\_\_\_ Part-time? \_\_\_\_\_ Both?

7. Are you open:

\_\_\_\_\_ 9 or 10 months (closed in summer) \_\_\_\_\_ 12 months (year-round)  
\_\_\_\_\_ Summer only \_\_\_\_\_ During school vacations

8. Please circle yes or no for each of the following schedules. (Please send a copy of your license if you offer evening or overnight care. This must be reflected on your license). Do you offer:

Weekend (on regular basis) Yes No Temporary/emergency Yes No  
Drop-in care Yes No Overnight Yes No  
Evening Yes No Rotating schedule Yes No

9. a. Do you require children to be toilet trained? Yes No

b. Will you toilet train or assist with toilet training toddlers except where a disability prevents toilet training? Yes No

c.. Will you administer prescribed medication with written permission? Yes No

10. Do you speak more than one language fluently? Yes No

If yes, which language(s): \_\_\_\_\_

11. Please check all that apply to your home:

\_\_\_\_\_ Apartment/condo \_\_\_\_\_ Trailer \_\_\_\_\_ Fenced yard  
\_\_\_\_\_ Townhouse \_\_\_\_\_ Duplex \_\_\_\_\_ Swimming pool  
\_\_\_\_\_ Single family home \_\_\_\_\_ Pets

\_\_\_\_\_ Totally smoke-free environment  
or \_\_\_\_\_ Smoke-free during child care hours

12. Please check any pets in the home or check "No Pets." Check all that apply.

\_\_\_\_\_ No pets in home \_\_\_\_\_ Dog \_\_\_\_\_ Cat \_\_\_\_\_ Other

13. Please check the meals that you provide:

\_\_\_\_\_ Breakfast \_\_\_\_\_ P.M. snack  
\_\_\_\_\_ A.M. snack \_\_\_\_\_ Dinner  
\_\_\_\_\_ Lunch \_\_\_\_\_ No meals/snacks



**SPECIAL NEEDS CARE**

22. Do you currently have a child or children with special needs or disabilities enrolled in care?  
Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_
23. Do you currently have a child or children in care who are receiving early childhood mental health services or behavioral consultation services?  
Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_
24. Do you currently have a child or children in care who are receiving early intervention services from Infant and Toddlers or Child Find other than mental health services?  
Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_
25. Have you ever referred a child or children for early intervention services?  
Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_
26. Did you terminate the care of a child due to behavior problems between January 1, 2017 and December 31, 2017?  
Yes \_\_\_\_\_ If yes, how many? \_\_\_\_\_ No \_\_\_\_\_

27. a. Have you had experience caring for children or adults with disabilities (child care, family, used Behavioral Counseling Services and/or community activities)? Yes No

b. If yes, please check which disability(ies) you have had experience with or knowledge of:

Cognitive		Physical	
<input type="checkbox"/> Delayed Development	<input type="checkbox"/> Learning Disability	<input type="checkbox"/> Arthritis	<input type="checkbox"/> Low Muscle Tone
<input type="checkbox"/> Down Syndrome	<input type="checkbox"/> Speech/Language Delay	<input type="checkbox"/> Cerebral Palsy	<input type="checkbox"/> Muscular Dystrophy
<input type="checkbox"/> Fragile X	<input type="checkbox"/> Traumatic Brain Injury	<input type="checkbox"/> Hearing/Vision Loss	<input type="checkbox"/> Orthopedic
<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Other _____	<input type="checkbox"/> Limited Mobility (requires a wheelchair)	<input type="checkbox"/> Spina Bifida
			<input type="checkbox"/> Other _____
Medical		Social/Emotional	
<input type="checkbox"/> Apnea Monitor	<input type="checkbox"/> Heart Problems	<input type="checkbox"/> Adjustment Disorder	<input type="checkbox"/> Emotional Problems
<input type="checkbox"/> BPD	<input type="checkbox"/> HIV+/AIDS	<input type="checkbox"/> Attachment Disorder	<input type="checkbox"/> Mood Disorder
<input type="checkbox"/> Blood/Organ Disorder	<input type="checkbox"/> Hydrocephalus	<input type="checkbox"/> ADD (Attention Deficit Disorder)	<input type="checkbox"/> Obsessive-Compulsive Disorder
<input type="checkbox"/> Bowel Disorder	<input type="checkbox"/> Lead Poisoning	<input type="checkbox"/> ADHD (Attention Deficit Hyperactivity Disorder)	<input type="checkbox"/> ODD (Oppositional Defiant Disorder)
<input type="checkbox"/> Cancer	<input type="checkbox"/> Prematurity	<input type="checkbox"/> Autism Spectrum	<input type="checkbox"/> Post-Traumatic Stress Disorder
<input type="checkbox"/> Colostomy Bags	<input type="checkbox"/> Reflux	<input type="checkbox"/> Behavior Problems	<input type="checkbox"/> Sensory Integration Dysfunction
<input type="checkbox"/> Cystic Fibrosis	<input type="checkbox"/> Respiratory	<input type="checkbox"/> Bipolar Disorder	<input type="checkbox"/> Social Communication Disorder
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Severe Allergies	<input type="checkbox"/> Depression	
<input type="checkbox"/> Drug Addicted/ Exposed Newborns	<input type="checkbox"/> Severe Asthma		
<input type="checkbox"/> Feeding Problems/ GI Tubes	<input type="checkbox"/> Seizure Disorder		
<input type="checkbox"/> Genetic Disorder	<input type="checkbox"/> Sickle Cell		
<input type="checkbox"/> Other _____	<input type="checkbox"/> Trach Tube		

- c. Please circle all that apply to your program:
- |  |     |    |
|--|-----|----|
| Currently wheelchair accessible (ramp or garage entry, etc.) | Yes | No |
| Working knowledge of sign language                           | Yes | No |

**EDUCATION**

28. a. Check the highest level of education you have completed (*check only one*):
- Less than High School     Associate Degree     Master Degree  
 GED/High School     Bachelor Degree     Doctoral Degree

b. If you have an Associate Degree or higher, check your major area of study.

- Child Development  
 Early Childhood Education  
 Elementary Education  
 Family Studies  
 Nursing  
 Psychology  
 Social Work  
 Special Education  
 Other \_\_\_\_\_

29. Have you completed college level credit courses in Child Development or Early Childhood Education?     Yes     No

30. Have you completed college level credit courses in Special Education?     Yes     No

31. Do you have a teaching certificate in Special Education issued by Maryland State Department of Education?     Yes     No

**TRAINING**

32. a. Do you have a 90 Hour Early Childhood Education Pre-service Certificate?     Yes     No  
b. Do you have a 45 Hour Infant and Toddler Pre-service Certificate?     Yes     No

33. Have you taken Medication Administration Training?     Yes     No

34. Please list any trainings you have taken relating specifically to care for children with disabilities.

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35. Do you have any medical training?     Yes     No

If yes, please describe the type of training, such as nursing assistant, practical nursing, hospital aide, etc.

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36. Do you follow any of the following State-approved curricula?

- Frog Street (ages 3 & 4)
- DLM EC Express (ages 3 & 4)
- Little Treasures (age 4)
- Investigator Club (ages 3, 4, & 5)
- Curiosity Corner and Kinder Corner (ages 4 & 5)
- Creative Curriculum for Family Child Care (ages 3, 4, & 5)
- Creative Curriculum (ages 3 & 4)
- Connect 4 Learning (age 4)
- OWL Opening the World of Learning
- None of the above

37. a. If you don't follow a State-approved curriculum, do you follow any pre-school curriculum?    Yes    No  
b. If yes, what is the name of the curriculum that you follow?

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38. Do you have CDA accreditation?    Yes    No    If Yes, please send documentation with this form.

**Short Format Form  
of Maryland 2019  
Market Rate Survey**

## Cost of Child Care Survey – Statewide Provider Rates

The Maryland State Department of Education, Office of Child Care is requesting information from child care providers to determine the cost of child care across Maryland. The information gathered is confidential and used for data analysis that will assist the Office of Child Care in policy change and revision and assist more providers to gain payment closer to the true cost of child care. The data collected is not related to nor will it be shared with licensing or posted on any website, without your approval. **This Survey may be mailed to: Maryland Family Network, 1001 Eastern Ave. FL. 2, Baltimore, Maryland 21202, faxed to: 1-410-385-0561 or emailed to [MDCOC@marylandfamilynetwork.org](mailto:MDCOC@marylandfamilynetwork.org)** The short form survey also may be done online by going to: <https://locate.marylandfamilynetwork.org/Provider/login>

**Child care providers will gain 1 PAU for completing this Survey by March 29, 2019.** Providers can also complete or update the Maryland Family Network LOCATE survey between the dates of February 1, 2019 – April 15, 2019 and will gain 2 PAU's for completing that survey. (PAU's will be given for only ONE survey. Please complete this short survey OR the LOCATE survey.)

Child Care Program Name (for Family Child Care please use your name) – enter below:		
LICENSE/REGISTRATION NUMBER (used for identification purposes only):		
Do you participate in Maryland EXCELS? <input type="checkbox"/> YES <input type="checkbox"/> NO		
CHILD CARE TYPE: <input type="checkbox"/> Child Care Center <input type="checkbox"/> Family Child Care Home <input type="checkbox"/> Letter of Compliance Facility <input type="checkbox"/> Large Family Child Care Home		
TELEPHONE NUMBER:		FAX:
Child Care PROGRAM EMAIL:		
PROGRAM ADDRESS:		
CITY:	STATE:	ZIP:
MAILING ADDRESS:		
CITY:	STATE:	ZIP:

Please complete the following information for each age group served. **Do not include any discounts applied based on family size or income. Enter Rates Effective July 1, 2019.**

Age Group(s) Served	Full Time (weekly)	Part-Time (weekly)	Before/After School (daily)	Drop-In (daily)	Evening (daily)	Overnight (daily)	Weekend (daily)
Infant (Birth-11mo)	\$		\$	\$	\$	\$	\$
Toddler (12mo-23mo)	\$		\$	\$	\$	\$	\$
2 year olds	\$		\$	\$	\$	\$	\$
3 year olds	\$		\$	\$	\$	\$	\$
4 year olds	\$		\$	\$	\$	\$	\$
5 year olds	\$		\$	\$	\$	\$	\$
School-Age (5+)	\$		\$	\$	\$	\$	\$
Do you charge a Security fee?	___ No		<input type="checkbox"/> Per Child      Annually: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Per Family				
Do you charge a Registration fee?	___ No		<input type="checkbox"/> Per Child      Annually: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Per Family				

**I DO WANT** MY FEES PUBLISHED


**I DO NOT WANT** my fees published on any website.

Name of person completing form & receiving PAU (REQUIRED):	
Email Address to Send PAU (REQUIRED):	

**Maryland 2019  
Market Rate Survey  
– Examples of  
Marketing and  
Social Media**

# MFN Social Media Examples for Maryland 2019

Post Details ✕



**Maryland Family Network**

Published by Josh Davidson [?] · March 1 · 🌐

⋮

On behalf of MSDE's Office of Child Care we are asking our network of child care professionals to complete the Market Rate Survey. Your answers to this survey help to determine child care scholarship rates across the state. It takes less than 2 minutes, and you even get 1 PAU for completing the survey!

MARYLANDFAMILYNETWORK.ORG ⓘ

**Market Rate Survey | Maryland Family Network**

Market Rate Survey Maryland's child care provider organizations work to better the field of early care and education, including work to increase funding to make high quality programs available and affordable for all...

✔ **Get More Likes, Comments and Shares**  
Boost this post for \$200 to reach up to 30,000 people.

**1,126**

People Reached

**70**

Engagements


Laurie Nelson Donohue  
Bonnie Haskins

👤 Mattie Biggers, Laura Seminario Thornton and 3 others
2 Comments
10 Shares

👍 Like
💬 Comment
📌 Hootlet
🔗 Share
🌐 Hootlet
🌐


Write a comment... 😊 📷 📺 🗨️

Most Relevant ▾



**Laurie Nelson Donohue** Yes, I got an email this week and filled it out a week or so ago.

Like · Reply · Message · 17w



**Bonnie Haskins** How do you get the PAU? I filled it out. Will it come by email?

Like · Reply · Message · 17w

### Performance for Your Post

<b>1,126</b> People Reached		
<b>24</b> Likes, Comments & Shares <span style="font-size: x-small;">#</span>		
<b>9</b> Likes	<b>5</b> On Post	<b>4</b> On Shares
<b>5</b> Comments	<b>2</b> On Post	<b>3</b> On Shares
<b>10</b> Shares	<b>10</b> On Post	<b>0</b> On Shares
<b>46</b> Post Clicks		
<b>0</b> Photo Views	<b>14</b> Link Clicks <span style="font-size: x-small;">#</span>	<b>32</b> Other Clicks <span style="font-size: x-small;">#</span>
<b>NEGATIVE FEEDBACK</b>		
<b>0</b> Hide Post	<b>0</b> Hide All Posts	
<b>0</b> Report as Spam	<b>0</b> Unlike Page	

Reported stats may be delayed from what appears on posts

Post Details



**Maryland Family Network**

Published by Josh Davidson [?] · March 10 ·

Have 2 minutes to spare? If so then you can be a part of determining how Child Care Subsidy rates are distributed across our state. Child Care providers even get 1 PAU for participating. Join us in trying to make Maryland's early care and education the best it can be.

MARYLANDFAMILYNETWORK.ORG

**Market Rate Survey | Maryland Family Network**

Market Rate Survey Maryland's child care provider organizations work to better the field of early care and education, including work to increase funding to make high quality programs available and affordable for all...

**Get More Likes, Comments and Shares**  
Boost this post for \$200 to reach up to 30,000 people.

**499**

People Reached

**25**

Engagements

**Boost Post**

Mattie Biggers, Joanne Hampson and 3 others

7 Shares

Like

Comment

Share

Hootlet

**Performance for Your Post**

**499** People Reached

**14** Likes, Comments & Shares

<b>7</b> Likes	<b>5</b> On Post	<b>2</b> On Shares
-------------------	---------------------	-----------------------

<b>0</b> Comments	<b>0</b> On Post	<b>0</b> On Shares
----------------------	---------------------	-----------------------

<b>7</b> Shares	<b>7</b> On Post	<b>0</b> On Shares
--------------------	---------------------	-----------------------

**11** Post Clicks

<b>0</b> Photo Views	<b>8</b> Link Clicks	<b>3</b> Other Clicks
-------------------------	-------------------------	--------------------------

**NEGATIVE FEEDBACK**

**0** Hide Post      **0** Hide All Posts

**0** Report as Spam      **0** Unlike Page

Reported stats may be delayed from what appears on posts



Post Details



**Maryland Family Network**

Published by Doug Lent [?] · March 14 · 🌐



**Baltimore City Child Care Resource Center**

March 14 · 🌐

Only 14 more days left to get your survey submitted. Please do it today and spread the word!

MARYLANDFAMILYNETWORK.ORG

**Market Rate Survey | Maryland Family Network**

Market Rate Survey Maryland's child care provider organizations work to better the field of early care and education, including work to increase funding to make high quality programs available and...

**129**  
People Reached

**2**  
Engagements

Boost Unavailable

Debbie Moore

- Like
- Comment
- Hootlet
- Share
- Hootlet

Performance for Your Post

**129** People Reached

**1** Likes, Comments & Shares

<b>1</b> Likes	<b>1</b> On Post	<b>0</b> On Shares
-------------------	---------------------	-----------------------

<b>0</b> Comments	<b>0</b> On Post	<b>0</b> On Shares
----------------------	---------------------	-----------------------

<b>0</b> Shares	<b>0</b> On Post	<b>0</b> On Shares
--------------------	---------------------	-----------------------

**1** Post Clicks

<b>0</b> Photo Views	<b>0</b> Link Clicks	<b>1</b> Other Clicks
-------------------------	-------------------------	--------------------------

NEGATIVE FEEDBACK

**0** Hide Post      **0** Hide All Posts

**0** Report as Spam      **0** Unlike Page

Reported stats may be delayed from what appears on posts

Post Details



**Maryland Family Network**

Published by Josh Davidson [?] · March 21 · 🌐

The Market Rate Survey helps to determine how Child Care Scholarships are distributed for each region of the state. By completing this Market Rate Survey child care providers are helping to determine the true cost of child care across the state. Please take 2 minutes and share your thoughts.

MARYLANDFAMILYNETWORK.ORG

**Market Rate Survey | Maryland Family Network**

Market Rate Survey Maryland's child care provider organizations work to better the field of early care and education, including work to increase funding to make high quality programs available and affordable for all...

Get More Likes, Comments and Shares  
Boost this post for \$200 to reach up to 30,000 people.

**267**  
People Reached

**8**  
Engagements

Boost Post

2 Shares

- Like
- Comment
- Share
- Hootlet

Performance for Your Post

**267** People Reached

**3** Likes, Comments & Shares

<b>1</b> Likes	<b>0</b> On Post	<b>1</b> On Shares
-------------------	---------------------	-----------------------

<b>0</b> Comments	<b>0</b> On Post	<b>0</b> On Shares
----------------------	---------------------	-----------------------

<b>2</b> Shares	<b>2</b> On Post	<b>0</b> On Shares
--------------------	---------------------	-----------------------

**5** Post Clicks

<b>0</b> Photo Views	<b>2</b> Link Clicks	<b>3</b> Other Clicks
-------------------------	-------------------------	--------------------------

NEGATIVE FEEDBACK

**0** Hide Post      **0** Hide All Posts

**0** Report as Spam      **0** Unlike Page

Reported stats may be delayed from what appears on posts



**Maryland Family Network**

Published by Doug Lent (?) · April 4 ·



**Baltimore City Child Care Resource Center**

March 22 ·

Only three days to go and Baltimore City is still lagging behind other jurisdictions in the number of responses. If you have not completed the survey please do so today and spread the word to others.

MARYLANDFAMILYNETWORK.ORG

**Market Rate Survey | Maryland Family Network**

Market Rate Survey Maryland's child care provider organizations work to better the field of early care and education, including work to increase funding to make high quality programs available and...



199

People Reached

11

Engagements

Boost Unavailable



Tonya Okafor

2 Shares

Like

Comment



Share Hootlet



**Performance for Your Post**

199 People Reached

5 Likes, Comments & Shares

1 Likes | 1 On Post | 0 On Shares

0 Comments | 0 On Post | 0 On Shares

4 Shares | 2 On Post | 2 On Shares

6 Post Clicks

0 Photo Views | 1 Link Clicks | 5 Other Clicks

**NEGATIVE FEEDBACK**


0 Hide Post | 0 Hide All Posts

0 Report as Spam | 0 Unlike Page

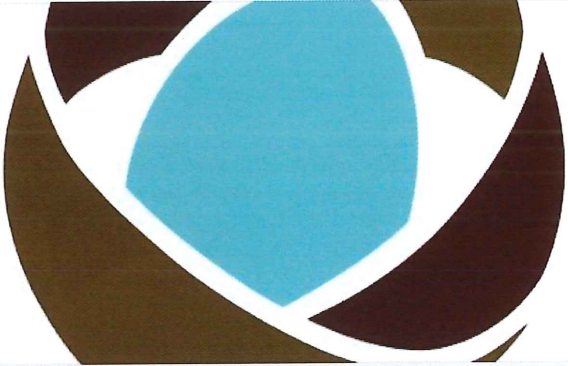
Reported stats may be delayed from what appears on posts



Post Details

 **Maryland Family Network**  
Published by Josh Davidson [?] · April 5 · 🌐

Child care providers, do you want to make sure your voice is heard when determining the new Child Care Scholarship disbursements? Take this 2 minute survey now and let your state legislators know where you stand.  
<http://bit.ly/2U1OIBu>



MARYLANDFAMILYNETWORK.ORG  
**Market Rate Survey | Maryland Family Network**  
Market Rate Survey Maryland's child care provider organizations work to...

✔ **Get More Likes, Comments and Shares**  
Boost this post for \$200 to reach up to 30,000 people.

**572** People Reached      **42** Engagements      [Boost Post](#)

👍 2      1 Comment 5 Shares

👍 Like      💬 Comment      📄 Share      Hootlet      🌐

Performance for Your Post

**572** People Reached

**17** Likes, Comments & Shares

<b>8</b> Likes	<b>2</b> On Post	<b>6</b> On Shares
<b>4</b> Comments	<b>1</b> On Post	<b>3</b> On Shares
<b>5</b> Shares	<b>5</b> On Post	<b>0</b> On Shares

**25** Post Clicks

<b>0</b> Photo Views	<b>8</b> Link Clicks	<b>17</b> Other Clicks
-------------------------	-------------------------	---------------------------

NEGATIVE FEEDBACK

- 0** Hide Post
- 0** Hide All Posts
- 0** Report as Spam
- 0** Unlike Page

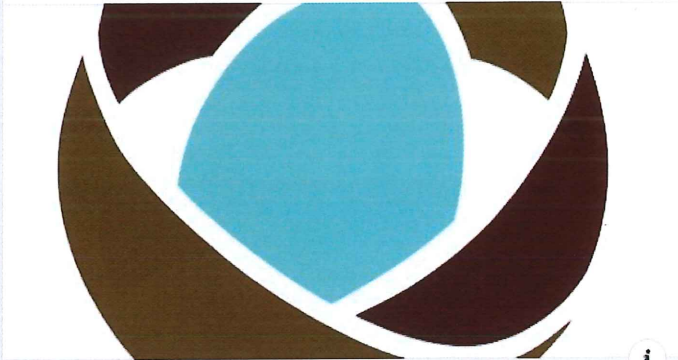
Reported stats may be delayed from what appears on posts



**Maryland Family Network**

Published by Josh Davidson [?] · April 14 · 🌐

As Child Care Scholarship rates affect both parents and providers, we think you should have a say in how the system works. Child care providers, take this 2 minute Market Rate Survey now and make sure you're a part of the decision-making process. SURVEY ENDS TOMORROW!  
<http://bit.ly/2U1OIBu>



MARYLANDFAMILYNETWORK.ORG

**Market Rate Survey | Maryland Family Network**

Market Rate Survey Maryland's child care provider organizations work to...

✔ **Get More Likes, Comments and Shares**  
Boost this post for \$200 to reach up to 30,000 people.

**736** People Reached      **33** Engagements      [Boost Post](#)

👤 Josephine Chan, Debbie Moore and 3 others      6 Shares

👍 Like      💬 Comment      📄 Share      Hootlet      🌐

**Performance for Your Post**

**736** People Reached

**12** Reactions, Comments & Shares *📊*

**5** Like      **5** On Post      **0** On Shares

**1** Love      **0** On Post      **1** On Shares

**0** Comments      **0** On Post      **0** On Shares

**6** Shares      **6** On Post      **0** On Shares

**21** Post Clicks

**0** Photo Views      **10** Link Clicks *📊*      **11** Other Clicks *📊*

**NEGATIVE FEEDBACK**

**3** Hide Post      **0** Hide All Posts

**0** Report as Spam      **0** Unlike Page

Reported stats may be delayed from what appears on posts

## Twitter -- Total of 195 link clicks.



**MD Family Network**  
@MDFamilyNetwork



Child care providers, please share your thoughts on Child Care Scholarship rates and the true cost of child care in Maryland. Take this 2 minute survey now and make your voice heard. [bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



10:00 AM - 23 Feb 2019





**MD Family Network**

@MDFamilyNetwork



State legislators make critical policy decisions that affect our lives. Take this 2 minute survey for child care providers to let our policymakers know the true cost of child care across the state. [bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



7:00 PM - 27 Feb 2019

1 Like



1





**MD Family Network**  
@MDFamilyNetwork



Child care providers, do you want to make sure your voice is heard when determining the new Child Care Scholarship disbursements? Take this 2 minute survey now and let your state legislators know where you stand. [bit.ly/2U1OIBu](http://bit.ly/2U1OIBu)



10:00 AM - 5 Mar 2019







**MD Family Network**  
@MDFamilyNetwork



As Child Care Scholarship rates affect both parents and providers, we think you should have a say in how the system works. Child care providers, take this 2 minute Market Rate Survey now and make sure you're a part of the decision-making process. [bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



11:00 AM - 13 Mar 2019





**MD Family Network**  
@MDFamilyNetwork



Have 2 minutes to spare? If so then you can be a part of determining how Child Care Scholarship rates are distributed across our state. Providers even get 1 PAU for participating. Join us in trying to make our early care and education the best it can be. [bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



11:00 AM - 17 Mar 2019





**MD Family Network**

@MDFamilyNetwork



On behalf of MSDE's Office of Child Care we are asking our network of child care professionals to complete the Market Rate Survey. Your answers to this survey help to determine child care scholarship rates across the state. It takes less than 2 minutes!

[bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



3:00 PM - 25 Mar 2019







**MD Family Network**

@MDFamilyNetwork



Take MSDE's Office of Child Care Market Rate Survey now and help to determine how child care scholarship rates are disbursed across the state. It only takes 2 minutes, and your answers will help to determine the true costs of child care in Maryland. [bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



4:00 PM - 28 Mar 2019





**MD Family Network**

@MDFamilyNetwork



State legislators make critical policy decisions that affect our lives. Take this 2 minute survey for child care providers to let our policymakers know the true cost of child care across the state. [bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



**MARYLAND  
FAMILY  
NETWORK**

10:00 AM - 5 Apr 2019



Add another Tweet



**MD Family Network**  
@MDFamilyNetwork



Child care providers, do you want to make sure your voice is heard when determining the new Child Care Scholarship disbursements? Take this 2 minute survey now and let your state legislators know where you stand. [bit.ly/2U1OIBu](https://bit.ly/2U1OIBu)



**MARYLAND  
FAMILY  
NETWORK**

3:30 PM - 9 Apr 2019



Add another Tweet



**MD Family Network**

@MDFamilyNetwork



As Child Care Scholarship rates affect both parents and providers, we think you should have a say in how the system works. Child care providers, take this 2 minute Market Rate Survey now and make sure you're a part of the decision-making process. [bit.ly/2U1OIBu](http://bit.ly/2U1OIBu)



10:00 AM - 13 Apr 2019

4 Retweets 2 Likes



SAL. INDA'



↻ 4

♥ 2



Add another Tweet

**Listing of Maryland  
Child Care Resource  
Network Child Care  
Resource Centers**



## MARYLAND'S CHILD CARE RESOURCE & REFERRAL CENTERS

### ANNE ARUNDEL COUNTY

#### **Arundel Child Care Connections**

44 Calvert Street, Room 140A  
Annapolis, MD 21401  
tel 443.782.501  
*Executive Director* Germaine Adams  
*email* [germaine@arundelccc.org](mailto:germaine@arundelccc.org)

### BALTIMORE CITY

#### **Baltimore City Child Care Resource Center**

1001 Eastern Avenue, 2<sup>nd</sup> Floor  
Baltimore, Maryland 21202  
tel 410.685.5150  
*Acting Executive Director* Nancy Pelton  
*email* [npelton@bcccrcc.org](mailto:npelton@bcccrcc.org)

### BALTIMORE COUNTY

#### **Child Resource Center Baltimore County at Abilities Network/Project ACT**

8503 LaSalle Road  
Towson, Maryland 21286  
tel 410.828.7700 x1292  
*Program Manager* Sara Bosley  
*email* [sbosley@abilitiesnetwork.org](mailto:sbosley@abilitiesnetwork.org)

### CECIL & HARFORD COUNTIES

#### **Child Resource Center Harford/Cecil County at Abilities Network/Project ACT**

3103 Emmorton Road  
Abingdon, Maryland 21009  
tel 410.828.7700 x1292  
*Program Manager* Sara Bosley  
*email* [sbosley@abilitiesnetwork.org](mailto:sbosley@abilitiesnetwork.org)

### CARROLL & FREDERICK COUNTIES

#### **Child Care Choices**

255 Clifton Blvd, Suite 319  
Westminster, Maryland 21157  
tel 410.751.2917  
*Director* Patty Morison  
*email* [pmorison@fcmha.org](mailto:pmorison@fcmha.org)

### HOWARD COUNTY

#### **Howard County Child Care Resource Center**

9830 Patuxent Woods Dr  
Columbia, Maryland 21046  
tel 410.313.1940  
*Program Manager* Debbie Yare  
*email* [dyare@howardcountymd.gov](mailto:dyare@howardcountymd.gov)

### MONTGOMERY COUNTY

#### **Montgomery County Child Care Resource Center**

1401 Rockville Pike, Suite 200  
Rockville, Maryland 20852  
tel 240.777.3110  
*Executive Director* Jennifer Arnaiz  
*email* [Jennifer.Arnaiz@montgomerycountymd.gov](mailto:Jennifer.Arnaiz@montgomerycountymd.gov)

### PRINCE GEORGE'S COUNTY

#### **Prince George's Child Resource Center**

9475 Lottsford Road, Suite 202  
Largo, Maryland 20774  
tel 301.772.8420  
*Executive Director* Jennifer Iverson  
*email* [jiverson@pgcrc.org](mailto:jiverson@pgcrc.org)

### SOUTHERN MARYLAND

CALVERT, CHARLES & ST. MARY'S COUNTIES

#### **Promise Resource Center**

8395 Old Leonardtown Rd  
Hughesville, Maryland 20637  
tel 301.290.0040  
*Program Director* Sarah Sutherland  
*email* [ssutherland@thepromisecenter.org](mailto:ssutherland@thepromisecenter.org)

### UPPER EASTERN SHORE

CAROLINE, KENT, DORCHESTER,  
QUEEN ANNE'S & TALBOT COUNTIES

#### **Chesapeake Child Care Resource Center**

Chesapeake College  
1000 College Circle  
Wye Mills, Maryland 21679  
tel 410.822.5400 x2357  
*Executive Director* Peg Anawalt  
*email* [manawalt@chesapeake.edu](mailto:manawalt@chesapeake.edu)

### LOWER EASTERN SHORE

WICOMICO, SOMERSET  
& WORCESTER COUNTIES

#### **Lower Shore Child Care Resource Center**

East Campus Complex, Suite 500  
Salisbury University  
Power and Wayne Streets  
Salisbury, Maryland 21804  
tel 410.543.6650  
*Project Director* Leslie Sinclair  
*email* [lasinclair@salisbury.edu](mailto:lasinclair@salisbury.edu)

### WESTERN MARYLAND

ALLEGANY, GARRETT  
& WASHINGTON COUNTIES

#### **APPLES for Children**

1825 Howell Road, Suite 3  
Hagerstown, Maryland 21740  
tel 301.733.0000  
*Executive Director* Heather Glass  
*email* [hglass@applesforchildren.org](mailto:hglass@applesforchildren.org)





MARYLAND  
FAMILY  
NETWORK

# MARYLAND'S CHILD CARE RESOURCE CENTERS

Every community in Maryland is served by one of twelve regional Child Care Resource Centers (CGRCs). Together, these Centers make up the Maryland Child Care Resource Network (MCCRN), which provides leadership and services designed to improve the quality, availability, and affordability of child care in communities across the State. The CGRCs that comprise the Network provide training opportunities and technical assistance to child care providers throughout Maryland. This innovative public-private partnership was initiated in 1989 and is administered by Maryland Family Network under a contract with the Maryland State Department of Education. Learn more by visiting [marylandfamilynetwork.org](http://marylandfamilynetwork.org).

