

Georgia's Source for Finding Quality Child Care

## **PROVIDER UPDATE FORM (DECAL KOALA)**

| Program Name:   | Provider Number:                                |  |  |  |  |
|---|---|--|--|--|--|
|   |   |  |  |  |  |
| Contact Information:  |   |  |  |  |  |
| Director/Admin name   | Facility Phone:                                 |  |  |  |  |
|   |   |  |  |  |  |
| Website:  | Facility Fax:                                   |  |  |  |  |
|   |   |  |  |  |  |
| Owner Contact Information (if different from above)             |   |  |  |  |  |
| Owner Name:   | Owner Phone                                     |  |  |  |  |
| Owner Email:  |   |  |  |  |  |
|   |   |  |  |  |  |
| Facility Address:   | Mailing Address:                                |  |  |  |  |
| Street:   | Street:   |  |  |  |  |
| City: Zip:  | City: Zip:                                      |  |  |  |  |
| County:   | County:   |  |  |  |  |
| Email Address(es)   |   |  |  |  |  |
| Primary Email Address:  |   |  |  |  |  |
| Secondary Email Address:  |   |  |  |  |  |
| Consumer Information Email:                                     |   |  |  |  |  |
| Consumer Information Phone:                                     |   |  |  |  |  |
| Consumer Information Priorie.                                   |   |  |  |  |  |
| Accepting New Children? YES NO                                  | Desired Capacity #                              |  |  |  |  |
| Accepts Children:   | <u> </u>  |  |  |  |  |
| □ Full Time   | <b>Do you carry liability insurance?</b> YES NO |  |  |  |  |
| □ Part Time   |   |  |  |  |  |
| Special Hours:  | Other Child Care Type:                          |  |  |  |  |
| ☐ Extended hours after normal close time                        | ☐ Early Head Start - GAEHS                      |  |  |  |  |
| □ Some weekends   | □ Head Start - GAHS                             |  |  |  |  |
| □ Some overnights   | □ Georgia Pre-K                                 |  |  |  |  |
| □ Drop in   | ☐ Before School Program                         |  |  |  |  |
| □ Open school holidays  | ☐ After School Program                          |  |  |  |  |
| □ Open school breaks  | □ Summer Camp                                   |  |  |  |  |
| □ Parent's morning out  |   |  |  |  |  |
| □ Parent's night out  |   |  |  |  |  |
| $\hfill\Box$ Respite for children or parents with special needs |   |  |  |  |  |
| School Break Care/Additional Scheduling Comments:               |   |  |  |  |  |

## Rates, Vacancies, and Ratios:

| Age Group:   | Weekly Rates: | Before School | After School | Vacancies | # Rooms | Ratios | Daily Drop-in |
|--------------|---------------|---------------|--------------|-----------|---------|--------|---------------|
| Under 1 year | \$            |               |              | #         | #       | _1:    | \$            |
| 1 year       | \$            |               |              | #         | #       | _1:    | \$            |
| 2 years      | \$            |               |              | #         | #       | _1:    | \$            |
| 3 years      | \$            |               |              | #         | #       | _1:    | \$            |
| 4 years      | \$            | \$            | \$           | #         | #       | _1:    | \$            |
| 5+ years     | \$            | \$            | \$           | #         | #       | _1:    | \$            |

|      |   | FCC Total Vacancies: #         |          |                       |  |
|------|---|--------------------------------|----------|-----------------------|--|
| Fina | ancial Information:                       |                                |          |                       |  |
|      | □ Accepts CAPS                            | Registration/Enrollment Fee:   |          | \$                    |  |
|      | □ Multi-Child Discount                    |                                |          |                       |  |
|      | □ Scholarship                             | Activity/Supply Fee:           |          | \$                    |  |
|      | □ Sliding Scale Fee                       |                                |          |                       |  |
|      |   |                                |          |                       |  |
| Tra  | nsportation:                              |                                | Meals    | :                     |  |
|      | □ To/From Home                            |                                | □ Breakf | fast                  |  |
|      | ☐ To/From School (List schools):          |                                | □ Lunch  |                       |  |
|      | ☐ Afterschool Only (PM Only)              |                                | □ Dinne  | r                     |  |
|      | □ Georgia Pre-K Only                      |                                | □ AM Sr  | nack                  |  |
|      | □ Near Public Transportation (Route No.): |                                | □ PM Sr  | nack                  |  |
|      | □ On School Bus Route (List schools):     |                                | □ Accon  | nmodates special diet |  |
|      |   |                                | □ Provid | les infant meals      |  |
|      |   |                                | □ Parent | ts must provide meals |  |
| Тур  | e of Vehicles:                            | Environment:                   |          |                       |  |
|      | □ Passenger Vehicle                       | □ No pets                      |          |                       |  |
|      | □ 12-15 Passenger Van                     | □ Outdoor play area            |          |                       |  |
|      | ☐ Multi-Function School Activity Bus      | □ Pool                         |          |                       |  |
|      | □ School Bus                              | ☐ Provide your own equipment   |          |                       |  |
|      |   | ☐ Secure grounds/keypad access |          |                       |  |
|      |   | ☐ Smoke-free environment       |          |                       |  |
|      |   | □ Sports fields                |          |                       |  |
|      |   | □ Tennis courts                |          |                       |  |
|      |   | □ Video surveillance           |          |                       |  |
|      |   | □ Webcam for parents           |          |                       |  |

| Act   | ivities (Choose up to five):                                      | Languages:   |             |          |            |  |  |
|---|---|--|-------------|----------|------------|--|--|
|   | □ Academic  | □ Engli  | ish:        | □ spoken | □ taught   |  |  |
|   | ☐ Outdoor adventure (hiking, nature discovery, survival skills)   | □ ASL:   |             | □ spoken | □ taught   |  |  |
|   | □ Aquatics  | □ Arab   | ic          | □ spoken | □ taught   |  |  |
|   | ☐ Creative expression (arts, ceramics, dance, music, etc.)        | □ Bulga  | arian       | □ spoken | □ taught   |  |  |
|   | □ Field trips   | □ Chin   | ese         | □ spoken | □ taught   |  |  |
|   | □ Gender specific - girls   | □ Farsi  |             | □ spoken | □ taught   |  |  |
|   | □ Gender specific - boys  | □ Frenc  | ch          | □ spoken | □ taught   |  |  |
|   | □ Religious/Faith-based   | □ Germ   | nan         | □ spoken | □ taught   |  |  |
| □ Scouting (Boy Scouts/Girl Scouts)               |   | □ Hebr   | rew         | □ spoken | □ taught   |  |  |
|   | □ Specialty (equestrian, computer)                                | □ Italia   | n           | □ spoken | □ taught   |  |  |
|   | ☐ Sports/Fitness (baseball, soccer, volleyball, frisbee)          | □ Japai  | nese        | □ spoken | □ taught   |  |  |
|   | ☐ STEM (Science, Technology, Engineering, Math)                   | □ Kore   | an          | □ spoken | □ taught   |  |  |
|   | $\hfill\Box$<br>Day Camp accommodates children with Special Needs | □ Pakis  | stani       | □ spoken | □ taught   |  |  |
|   |   | □ Portu  | uguese      | □ spoken | □ taught   |  |  |
|   |   | □ Russ   | ian         | □ spoken | □ taught   |  |  |
|   |   | □ Span   | nish        | □ spoken | □ taught   |  |  |
|   |   | □ Vietr  | namese      | □ spoken | □ taught   |  |  |
|   |   |  |             |          |            |  |  |
| Cur   | riculum: Famil  | y Engagement:  |             |          |            |  |  |
|   | □ A Beka  | <ul> <li>Accommodates languages spoken by families served</li> </ul>           |             |          |            |  |  |
|   | □ Creative  | ☐ Suggestion box   | for parents |          |            |  |  |
|   | □ High Reach  | □ High Reach □ Communications, including flyers, emails, newsletters, etc.     |             |          |            |  |  |
| ☐ High Scope ☐ Annual Open-House and regular pare |   |  |             |          | activities |  |  |
|   | □ Montessori  | <ul><li>Monthly program calendar</li><li>Surveys for parent feedback</li></ul> |             |          |            |  |  |
|   | □ Pinnacle  |  |             |          |            |  |  |
|   | □ Other (Please list):  | $\hfill\Box$<br>Younger siblings welcomed at no cost during parent meetings    |             |          |            |  |  |
|   |   | □ Other (Please list):   |             |          |            |  |  |

