

MSDE-OCC Required Paperwork

Center: _____

Name of Child: _____

- ____ MSDE-OCC Health Inventory/ Compliance Form
 - Part 1 – completed, signed, & dated
 - Part 2 – w/ doctor's signature/stamp & date
- ____ DHMH Blood Lead Testing Certificate
- ____ DHMH Immunization Certificate
- ____ Medical Alert Form
- ____ Medication Administration Forms (if applicable)
- ____ Allergy/Asthma/Seizure/Special Health Condition Forms (if applicable)
- ____ Topical Product Authorization Form
- ____ Emergency Form (Updated Annually)
 - Located in Center Emergency Binder(s)
 - All sections complete; signed & dated
- ____ "A Parent's Guide to Regulated Child Care"
- ____ All About My Child form

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