



## Request for Program Assessment

**Instructions:** To be eligible for an assessment, participants must have a draft rating 3 or published Quality Rating 3. To request an assessment, email this completed form to your Program Coordinator. The MSDE Quality Assessments Coordinator will contact you to schedule your assessment(s).

**Today's Date:** \_\_\_\_\_

**Director or Provider Name:** \_\_\_\_\_

**Program Name:** \_\_\_\_\_

**License/Registration #:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
 (Street number/street name/city/zip code)

**County:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Daytime Phone Number:** \_\_\_\_\_

**Program Type (Select one):**      Family Child Care              Child Care Center              School-Age Only

**Has your program had a CLASS® observation conducted by a currently Certified CLASS® Observer within the past 12 months? (Select one):**      Yes      No

**List any date(s) that the program is unable to have an assessment site visit for the next 60 days .**  
 (Examples: holiday, field trip, or professional development days)

Date(s) Program is Unavailable	



**Family Child Care Providers:**

List the birthdates of all children, excluding school-age children. This will help determine which CLASS® tools will be used during the observation.

Children's Birthdates	

**Child Care Centers:**

Classroom Name	Name(s) of Teaching Staff	# of Children Under 18 Months	# of Children 18-36 Months	# of Children 3-5 Years	# of Children 5-12 Years

**Age ranges as defined by the assessment tools:**

- Infant CLASS: 6 weeks up to 18 months
- Toddler CLASS: 18 up to 36 months
- Pre-K CLASS: 3-5 years
- School-Age Care Environment Rating Scale: 5-12 years