



## Request for Program Assessment

**Instructions:** To be eligible for an assessment, participants must have a published Quality Rating 3 and must have met the requirements of level 4 or 5 in all DAP and ADM subcategories. To request an assessment, email this completed form to your Program Coordinator. Once the form has been processed, MSDE will contact you to schedule the assessment(s).

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

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

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

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

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

**County:** \_\_\_\_\_  
(If Baltimore City, include "City")

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

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

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

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

(CLASS® Summary Reports include Domain average scores. Continuous Quality Improvement (CQI) visits are not the same as CLASS® assessments.)

**List any date(s) that the program is unable to have an assessment site visit for the next 90 days.**  
( Examples: holiday, field trip, or professional development days)

Date(s ) Program is Unavailable	



**Family and Large Family Child Care Providers:**

List **only the birthdates** of all children in care, excluding school-age children. Do not include children’s names or other identifying information. This will help determine which CLASS® tools will be used during the observation.

Children’s Birthdates	Children’s Birthdates

**Child Care Centers and School-Age Only Programs:**

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

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

- Infant/Toddler CLASS: 6 weeks to 36 months
- Pre-K CLASS: 3-5 years
- K-3rd CLASS: 5-12 years