Staff File Checklist

All items are to be completed before staff members work with children, except as noted:

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Staff file requirements: | |  | | | | |  |
| Name: |  | | | | | | |
| Home address: | | | | | | | |
| Phone number: | | | | | | | |
| * Date of birth: | | | * **Date of hire:** | | | * **Date of termination:** | |
| * Emergency contact name & number: | | | | | | | **Date completed**  **or documented:** |
| * Job description | | | | | | |  |
| * Application, résumé, or personal data sheet | | | | | | |  |
| * Reference #1: | | | | | | |  |
| * Reference #2: | | | | | | |  |
| * Release of employment history form | | | | | | |  |
| * Service letters: * Two additional references are required if unable to obtain at least one service letter | | | | | | |  |
| * Orientation | | | | | | |  |
| * Employee declaration | | | | | | |  |
| * Adult abuse registry check | | | | | | |  |
| * Initial and yearly review of child abuse recognition and reporting law | | | | **Dates** |  | |  |
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| * Acknowledgement that alcohol and illegal drugs are prohibited at work | | | | | | |  |
| * Initial and yearly review of safe sleep procedures, if center serves infants | | | | **Dates** |  | |  |
|  | |  |
| * Training on proper handling, storage, preparation, and feeding of breast milk and formula, if applicable | | | | | | |  |
| * Proof of fingerprinting before beginning to work | | | | | | |  |
| * Eligibility results   (cannot be left alone with children until these are received) | | | | | | |  |
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| * Copy of driver’s license, if transporting children | | | | | | |  |
| * Physical | | | | | | |  |
| * TB test or screening (within 30 days of hire) | | | | | | |  |
| * Delaware First qualifications certificate (within 60 days of hire & cannot be alone with children until certificate is received) | | | | | | |  |
| * CPR certification (within two months of hire) | | | | | | |  |
| * First Aid certification (within two months of hire) | | | | | | |  |
| * Administration of medication training /certification (within two months of hire) | | | | | | |  |
| * Professional development plan (within three months of hire) | | | | | | |  |
| * Annual training hours | | | | | | |  |