

# EMPLOYEE FILE CHECKLIST



Employee Name \_\_\_\_\_

Employment Date: \_\_\_\_\_

<input type="checkbox"/> Employment Application <input type="checkbox"/> 5 Year Employment History Check <input type="checkbox"/> Attestation of Good Moral Character <input type="checkbox"/> Acknowledgement Form (Annual) <input type="checkbox"/> Proof of Education	All on file prior to employment
<input type="checkbox"/> DCF Child Care Eligible Fingerprint Screening Results (Clearinghouse) <input type="checkbox"/> DCF Training Transcript (if not new to industry) <input type="checkbox"/> Safety Precaution Training (and then annually)	All on file prior to employment
<input type="checkbox"/> Fire Extinguisher Training <input type="checkbox"/> Safe Sleep Training (for all staff if there are children <b>under 1</b> ) <input type="checkbox"/> Start 40 Hour Training <input type="checkbox"/> Completed 40 Hour Training	Within 30 days of hire Within 30 days of hire Within 90 days of employment Within 12 months of training start date
<input type="checkbox"/> Literacy Training	Completed within one (1) year of employment
<input type="checkbox"/> Approved Infant Training	Completed within 90 days of employment if caring for infants.
<input type="checkbox"/> First Aid Certificate /Infant-Child CPR Certificate <input type="checkbox"/> Annual Physical for Vehicle Driver <input type="checkbox"/> Current Driver's License <input type="checkbox"/> Transportation Training (prior to participating)	When applicable
<input type="checkbox"/> 5 Year Rescreening in Clearinghouse	5 years from DCF Child Care Eligible Date but be Aware of Prints Retained Date