



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH
Community Based Regulation Section

PROOF OF WORKERS' COMPENSATION INSURANCE

FAMILY DAY CARE HOMES, GROUP DAY CARE HOMES
AND CHILD DAY CARE CENTERS

IF YOU HIRE EMPLOYEES TO WORK IN YOUR PROGRAM State Law (CGS Section 31-286a(b)) **requires** that no state department, board or agency may issue or renew a license, or permit to operate a business in this state unless the applicant first presents sufficient evidence of current compliance with the workers' compensation insurance coverage requirements of Section 31-284.

This means that if you hire employees to work in your family day care home, group day care home or child day care center on a part time or full time basis, you must submit to the Department of Public Health as part of your initial license application or relicensure application, sufficient evidence of compliance with this law.

For More Information Contact:

Your Insurance Agent or The Workers' Compensation Commission: 1-800-223-9675 or 1-860-493-1534

**THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR APPLICATION
FOR A CHILD DAY CARE LICENSE (EVEN IF YOU DO NOT EMPLOY STAFF)**

Program/Provider Name: _____ New Application
Address: _____ Relicensure Application
Town/State/Zip: _____ Telephone: _____ License #: _____

1. Do you hire employees in your program that requires you to obtain Workers' Compensation Insurance? Yes No

If "Yes", please complete the following:

Name of Insurer _____ Insurance Policy # _____

Effective Dates of Worker's Compensation Coverage ____/____/____ to ____/____/____

I certify that all of the above statements contained herein are true and correct to the best of my knowledge.

(Signature Operator/Provider)

(Date)

(Printed Name)

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10/20/11



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