

Licensed Group and School Age Program Staff Records Checklist

Massachusetts Department of Early Education and Care (EEC)

1. Staff Legal Name and Position						
2. Date of Birth						
3. Date of Hire						
4. EEC Certificate/ Minimum Hiring						
5. PQR Number						
6. BRC Status (Provisional/Suitable)						
7. BRC Renewal Date						
8. Physical Date						
9. MMR (need two)						
10. First Aid Expiration Date						
11. CPR Expiration Date*						
12. EEC Essentials 2.0 Certificate Date						
13. EEC Essentials 2.0 Refresher Date*						
14. Professional Development Hours						
15. Itinerant Services: Suitability Letter*						
16. Itinerant Services Parent Consent*						
17. 7D/School Bus License & Expiration						

*=If needed/required

Attestation	Program Name: _____
<i>For Program Administrator or other person in charge of reviewing program staff BRCs only:</i>	
Name and Position: _____	Date: _____
Signature: _____	
<i>For Human Resources/Personnel Manager or other person in charge of maintaining program staff files only:</i>	
<p>I understand that by signing below, I confirm that I am authorized to act as the official agent of _____ (Program Name)</p> <p>I confirm that _____ (Program Name) maintains a complete, accurate and confidential record for each staff member.</p> <p>Each personnel record contains documentation listed above in the Staff Records Checklist along with all required documentation as outlined in EEC Regulations. The program must provide, upon request, the full staff file for EEC review.</p>	
Name and Position: _____	Date: _____
Signature: _____	

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