Facility Management List

Facility Name: ____________________________________________________________
Facility Address: _________________________________________________________
Director Name: ___________________________________________________________
(The director is ultimately accountable for all aspects of the facility operation)

According to Rule 414-300-0010(12), “A management list shall be submitted with the application.” This list will identify who in the organization will be responsible for each function. Please keep a copy of this list in your records as it will be reviewed at each certification renewal.

Please enter the name of the person who is responsible for each of the following tasks:

Financial Management: ______________________________________________________
Maintaining Records: _______________________________________________________
Budgeting: _______________________________________________________________
Policy Development: _________________________________________________________
Staff Management: _________________________________________________________
Staff Orientation: __________________________________________________________
Staff Training: _____________________________________________________________
Maintenance of buildings & grounds: __________________________________________
Transportation of Children: _________________________________________________
Ensuring the appropriateness of program activities: ____________________________

______________________________     __________________________
Director’s Signature     Date