

FFN Caregivers Survey

Child Care Services provides support to FFN caregivers.

Your feedback is needed to help us provide services to you. If you or some one you know is a FFN caregiver (unlicensed child care provider) and could use our services, please complete the survey and return to Becky Littlewolf @ LLCCS 115 Sixth St. NW, Suite E, Cass Lake, MN. 56633 you will be placed on our mailing list and be eligible for our services.

* FFN caregivers Name & daytime phone #: _____.

* FFN caregiver mailing address: _____

* Do the children you care for live in your home? Yes or No

* What is the reason you care for the children: ____Parent works, ____Parent attends school OR List other
_____.

*Name of currant employer or school you are attending:_____.

* Would you attend free trainings on child development or health and safety issues? Yes or No

* How many children do you currently care for? ____1, ____2, ____3, ____4, ____5, ____6, ____7.

* What are their ages? Newborn_____, Infant_____, Toddler_____, Pre-school_____, School age_____.

Check below the days you provide care and the time of day:

	Day	Please list the time (example 7-3:30 pm)	
	Monday		
	Tuesday		
	Wednesday		
	Thursday		
	Friday		
	Saturday		
	Sunday		

* How long have you been providing care for these children?_____.

* How many hours a week do you provide care? __5-10 hrs, __15-20 hrs, __25-30 hrs,__35-40 hrs or ____more

* What services would you like to see available through Leech Lake Child Care Services?_____
_____.



-----**TEAR HERE**-----

Please contact us if you are in need of Health & Safety supplies to better the quality of care in your home.

1-800-551-0969 or 218-335-8257