DEPARTMENT OF SERVICES FOR CHILDREN, YOUTH AND THEIR FAMILIES
OFFICE OF CHILD CARE LICENSING
KENT COUNTY (302)739-5487 TIME: 6:15 P.M. TO 7:15 P.M.

REGISTRATION FOR ADMINISTRATION OF MEDICATION CERTIFICATION TEST

State law requires that only individuals who have successfully completed a state approved test with a grade of at least 80% may administer medication in child care. Prior to taking the test, you must study the *Administration of Medication Self-Study* packet located at: http://kids.delaware.gov/pdfs/occl_administration_of_meds_2005.pdf

The test will be conducted and monitored by a Registered Nurse who will be available from 6:15 p.m. to 6:30 p.m. on the testing night to answer any questions you or your staff may have about the content of the self-study packet. The testing begins at 6:30 p.m. and ends at 7:15 p.m. Admittance to the testing session will not be permitted after the test begins so do not arrive late. **Current Photo ID is required to attend the session**.

There is a **Non-Refundable** fee of **$10.00 per person** payable by money order with this Registration Form. Child care centers, please list the names of staff and date of birth of those attending, to attend on a separate page. Only those individuals who are at least 18 of age, who are employed with a licensed facility, have prepaid, and are pre-registered will be permitted to attend. Please select an alternate date for which you could attend. You are registered for your first choice unless otherwise notified. A new registration slip and additional money order is required if you fail to attend or if you reschedule your test.

KENT COUNTY TESTING LOCATION →

OFFICE OF CHILD CARE LICENSING
821 SILVER LAKE BOULEVARD, SUITE 103
DOVER, DELAWARE 19904

Wednesday, January 28, 2015	Wednesday, February 25, 2015	Wednesday, March 25, 2015
Wednesday, April 22, 2015	Wednesday, May 20, 2015	*No Testing in June*
Wednesday, July 29, 2015	Wednesday, August 26, 2015	Wednesday, September 23, 2015
Wednesday, October 28, 2015	Wednesday, November 18, 2015	*No Testing in December*

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REGISTRATION SLIP FOR KENT COUNTY *[PLEASE PRINT LEGIBLY]*

NAME:	*(PRINT LEGIBLY)*	YOUR PHONE #:		DOB:	
YOUR EMAIL ADDRESS:					
STREET ADDRESS:		CITY/STATE/ZIP:			
IF YOU WORK FOR A CENTER: NAME OF CENTER:		CENTER PHONE #:			
TESTING DATE: 1ST CHOICE		2ND CHOICE			

MAKE MONEY ORDERS PAYABLE TO: STATE OF DELAWARE/DFS

➢ NO CHECKS ~ NO CASH ~ MONEY ORDERS ONLY ➢

MONEY ORDER MUST BE COMPLETED IN FULL. INCOMPLETE MONEY ORDERS WILL BE RETURNED.

Detach and mail registration to:

OFFICE OF CHILD CARE LICENSING
821 SILVER LAKE BLVD, SUITE 103
DOVER, DELAWARE 19904

$10.00 PER PERSON