



## NECPA Verification Visit Request Form

The purpose of this form is to notify the NECPA Commission that your program has completed the self-study portion of the NECPA accreditation process and that you are ready to begin scheduling your verification visit.

### Program Information

Program Name:		Enrollment Expiration Date:		
Site Number:		Accreditation Expiration Date:		
Street Address:				
City, State, Zip Code:				
Director:		Email Address:		
Phone Number:		Fax Number:		
Owner:		Select One:      Center Based      Home Based		
State License Number:		License Capacity:		
Number of Classrooms:		Number of Buildings:		
Days of Operation ( <i>Check all that apply</i> ):	Monday	Tuesday	Wednesday	Thursday      Friday
Block Out Dates* ( <i>Only one date per box</i> ):	1)	2)	3)	4)      5)
<small>*Block Out Dates are any days that your program would not be available for a verification visit. You may have five block out days. The NECPA Office is closed on federal holidays and will not conduct verification visits on these days.</small>				
Additional Block Out Dates** ( <i>Optional; Only one date per box</i> ):	1)	2)	3)	4)      5)
<small>**Each additional Block Out Date beyond the permitted five days is subject to a \$25 fee plus processing.</small>				
6)	7)	8)	9)	10)

### Visit Scheduling Timeframe

Use the chart below to determine your program's projected scheduling period based on the date of your visit request.

<b>Date of Request:</b>	<b>(+ 4 Months)</b>	<b>Program visit will occur no later than:</b>
<i>Example: October 1, 2017</i>		<i>Example: February 1, 2018</i>
_____		_____

**Scheduling:** Your program's visit will occur within 120 days (4 months) from the date the NECPA Office receives a Verification Visit Request Form with full payment.

**National Accreditation Council (NAC) Review:** The results of your program's verification visit will be issued within 60 days from the date of the visit.

*\*Accredited programs should contact the NECPA Office immediately with any concerns about a lapse in accreditation.*

#### FOR OFFICE USE ONLY

Date Received: _____	Check Number: _____	Active Enrollment (Y/N): _____
Timeline Review: _____	Payment Complete: _____	Notes: _____
Additional B.O.D. (Y/N): _____	Edition: _____	_____

## Order Placement

NECPA Payment Schedule (Based on licensed capacity)	Quantity Per Order	Price Per Order	Check One	Subtotal
Verification fee for 7-60 Children	1	\$1,050.00**		
Verification fee for 61-120 Children	1	\$1,150.00**		
Verification fee for 121-240 Children	1	\$1,250.00**		
Verification fee for 241+ Children	1	\$1,350.00**		
Additional Block Out Date Fee		\$25.00	N/A	
<b>Subtotal</b>				<b>\$</b>
<b>Setup Fee (10% of Subtotal)</b>				<b>\$</b>
<b>Total</b>				<b>\$</b>

Fees are non-refundable and subject to change without prior notice. All returned checks will incur a \$35 fee.

\*\*Program cancellations, changes to block out dates, requests to place program on hold, and/or refusal of dates are subject to additional fees.

## Payment Information

<b>Check (Payable to NECPA) #:</b>	<b>Visa</b>	<b>MasterCard</b>	<b>PO or Invoice #:</b>
<b>Credit Card Number:</b>			<b>Expiration:</b>
<b>Name on Card (Please Print):</b>			
<b>Signature:</b>			
<b>Billing Address:</b>			

## Agreements – Please Initial Each and Sign

	I have answered each question in the yellow and blue sections of the Self Assessment Instrument or given a written explanation in the comment section if the question is not applicable to my program.
	I have collected surveys from at least 70% of my full and part time staff and 50% of the families we serve.
	In the event that I place my program’s verification status on hold, any changes to NECPA standards and fees will be applicable to the program at the time of reactivation of the verification visit request.
	I understand that if the payment for any Additional Block Out Date listed on page 1 of this form is not authorized in the Order Placement Section of this form, only the first five days listed will be considered in the scheduling process.
	I understand that my visit will be scheduled within 120 days from the date the NECPA office receives this form <u>and</u> payment in full.
	I understand that program cancellations, changes to block out dates, requests to place program on hold, and/or refusal of visit dates are subject to additional fees.
	I understand that my program must be in operation for at least one year prior to submitting the NECPA Verification Visit Request Form.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For more information on NECPA news, policies, procedures, amendments and updates, please visit [www.necpa.net](http://www.necpa.net).

## Verification Visit Scheduling Process: Important Information

The NECPA does not conduct verification visits on Federal Holidays. Please omit these dates from your selection of Block Out Dates:

Holiday Schedule	
January 1	New Year's Day
January	Birthday of Martin Luther King, Jr.
February	Washington's Birthday
May	Memorial Day
June	Juneteenth
July 4	Independence Day
September	Labor Day
October	Columbus Day
November	Veterans Day
November	Thanksgiving Day
December 25	Christmas Day

### NECPA Verification policies and Cancellation Fees

1. To ensure the consistency of the NECPA Verification process, verifiers are instructed to immediately contact the NECPA Office if a program's Self Assessment Instrument is not fully completed and/or if necessary documentation is not completed and easily accessible. Following the NECPA Office's notification, and in the event the verifier must depart prematurely due to these circumstances, the program will be asked to resubmit a verification payment and the verification visit will be rescheduled.
2. The following fees will apply:
  - a. \$75.00 - Denial of a verification visit date that is not listed as a block out date on your visit request form
  - b. \$75.00 - Cancellation outside thirty days of a confirmed visit date
  - c. \$625.00 - Cancellation within thirty days of a confirmed visit date
3. When a program cancels a confirmed verification visit date, the processing time for scheduling will reset to a guaranteed visit within 120 days from the date the program submits a completed Verification Cancellation and Visit Reschedule Form. Block Out Dates are not included in the rescheduling process—programs may elect to purchase additional dates on the reschedule form.
4. In the event there is a fluctuation or postponement of your visit due to NECPA scheduling variances, you will not incur penalties and will be notified immediately of changes by phone and/or email.

### Am I Ready for my Verification Visit?

- I have completed my Self Assessment Instrument by answering ALL questions and have collected surveys from at least 70% of my full and part time staff and 50% of the families we serve.
- I have completed the Program/Center Identification and Contact Information page in the Self Assessment Instrument.
- I have a copy of my current state license for the verifier.
- I have a filing system with copies of written documentation for each item in the Yellow section.
- I have ensured that the facility itself as well as teacher to child interactions, and program operations are fully aligned with the NECPA standards according to the policies and procedures described in the Yellow documentation section and the observation items in the Blue section of the Self Assessment Instrument.
- Diplomas, degrees and credentials of staff members are documented (a notarized statement of credentials will be accepted with appropriate information as to date and name of the educational institution where a graduation or degree was earned)
- All staff training hours from **12 months prior to your visit date** are well organized and ready to be reviewed by your verifier. This may require programs with staff members that have not yet completed the necessary 24 or 30 hours of continuing education to make additions to the corresponding documentation file with new training certificates or professional development plans in the weeks or months leading up to the visit.