

PRINT ON YOUR LOCAL LETTERHEAD

Date:

Dear _____,

You are currently enrolled as a Registered Category _____ child care provider with the state of Iowa.

I attempted to conduct an annual compliance visit on _____, and discovered you were not available. In order to continue as a registered child care provider, you will need to contact me to schedule a time when we can conduct the annual visit. Please review the options listed below.

1. If you intend to continue as a registered child care provider, please call me on or before _____, so that we can schedule a time to conduct the annual visit. If I am away from my phone, please leave a message with a telephone number where I can reach you.
2. If you are no longer interested in continuing as a registered child care provider, simply return your certificate to me in the return envelope I have included in this mailing. I will then proceed with a voluntary cancellation of your registration.

If you fail to return a phone call to me or your certificate in the mail on or before _____, I will consider the non-action as a request to voluntarily cancel your status as a registered child care provider. I will make appropriate entries to our system to close your registration.

I have included a business card with all of my contact information for your convenience.

Sincerely,