



Office Use Only-2019

Date Received:

Date Processed:

Name of Child Care Program: _____

Licensing Number: _____ County: _____

Name of Director: _____ Director's Email: _____

The following individuals are no longer employed with my program:

| Registry Id Number | Name | Last Day of Employment |
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As director of the above listed child care program I confirm that the individuals listed are no longer employed with my child care program. I understand that in order for those individuals to be removed that I must complete the last day of employment for those individuals so that WV STARS staff can remove them from being employed with my program. Please note it may take up to 30 days.

Signature of Director

Date

West Virginia State Training and Registry System

611 7th Ave, Suite 322 Huntington, WV 25701

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Fax (304) 529-2535

Email: wvstars@rvcds.org

This program is being presented with financial assistance as a grant from the West Virginia Department of Health and the West Virginia Department of Human Services and is administered by West Virginia Early Childhood Training Connections and Resources, a program of River Valley Child Development Services.