



**Municipality of Anchorage  
Child Care Licensing Program**

Office Use Only

**EMERGENCY CAREGIVER DESIGNATION AND QUALIFICATION FORM  
For Child Care Home**

---

**PLEASE PRINT:**

I hereby designate \_\_\_\_\_ effective \_\_\_\_\_  
to be an Emergency Caregiver for \_\_\_\_\_ owned and  
(Name of Child Care Facility)  
operated by \_\_\_\_\_.  
(Name of Administrator)

*I understand that any individual serving in the role of an emergency caregiver is not required to submit any documents for a background clearance; however, they must be an adult with a reputable character. The emergency caregiver may only assist in an emergency situation for a part of the day during the emergency. By definition, an emergency is a serious illness, accident or other emergency.*

\_\_\_\_\_  
Signature of Administrator Date

---

*For Emergency Caregiver*

- I understand I must be a responsible individual of reputable character who exercises sound judgment and is truthful and honest.*
- I understand that I may care for children only in the event of an emergency in the absence of the administrator.*
- I understand that an emergency is an unplanned event, serious illness, accident or other serious emergency situation.*
- I also understand I must cooperate with licensing representatives and other agencies during any inspections or investigations.*

\_\_\_\_\_  
Signature of Emergency Caregiver Designee Date