



LOURDES A. LEON GUERRERO
GOVERNOR, MAGA'HAGA'

JOSHUA F. TENORIO
LT. GOVERNOR, SIGUNDO MAGA'LÁHI

GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT

BUREAU OF CHILD CARE SERVICES

Child Care Assistance Program



ARTHUR U. SAN AGUSTIN, MHR
DIRECTOR

LAURENT SF DUENAS, MPH, BSN
DEPUTY DIRECTOR

TERRY G. AGUON
DEPUTY DIRECTOR

FOSTER APPLICANT

FILL OUT YOUR APPLICATION FORM COMPLETELY AND BRING ALL DOCUMENTS REQUESTED.

REQUIRED DOCUMENTS TO BRING WITH YOU:

- Child Care Application
- Child Care Provider Data Form

Applicant & Co-Applicant

- Valid Picture ID (Examples: Driver's License, Guam ID, Work/School ID, Passport, Permanent Residency Card (Green Card))
- Ex Parte
- Power of Attorney

Child / Children:

- Birth Certificate(s) or US Passport(s)
- Immunization Cards
- Social Security Card(s) or Receipt of Application

- YOU MAY EMAIL THE COMPLETE PACKET TO: childcare@dphss.guam.gov OR DELIVER TO 130 UNIVERSITY DR. CASTLE MALL RM.15, MANGILAO GUAM 96913.

Rcvd by Employee: _____