

Texas Rising Star Initial Screening Form—School Age

Facility Name: _____

Address: _____

Director Name: _____

License #: _____

Initial Review for Licensed Child Care School Age Programs

1. Facility has CCR licensing history for at least a 12-month period? ☐ Yes ☐ No

Date of Review: _____

Review most recent 6-months of CCR licensing history for the subsequent sections

Stop process if “No”

2. On Corrective or Adverse Action with CCR? ☐ Yes ☐ No

On Corrective Action with Board? ☐ Yes ☐ No

On Notice of Freeze with TWC? ☐ Yes ☐ No

Cited for 744.2607 (b-d) by CCR? ☐ Yes ☐ No

Stop process if “Yes” for any of the above.

3. **CCR Deficiency Review**

Facility is unable to be certified as Texas Rising Star if they have received any of the following deficiencies listed below:

☐ 745.635 Criminal Convictions or Central Registry Findings – Take Appropriate Action

☐ 745.641 Background Checks Requirement – Providing Direct Care

☐ 744.1201(4) Responsibilities of Employees and Caregivers – Ensure No Child is Abused, Neglected, or Exploited

☐ 744.1201(5) Responsibilities of Employees and Caregivers – Report Suspected Child Abuse, Neglect, or Exploitation

Stop process if any of the above have been received within the previous 6-months.

4. **Total Points Review**

Facility is unable to be Texas Rising Star if they have received more than 25 total points (when reviewing CCR weighted High and/or Medium-High Deficiencies received within the previous 6-months).

Total points received: _____

Total number of High Deficiencies: _____

Total number of Medium-High Deficiencies: _____

Total points of High Deficiencies (5 points each): _____

Total points of Medium-High Deficiencies (3 points each): _____

Does the facility have more than 25 total points? ☐ Yes ☐ No

Stop process if “Yes”

Texas Rising Star Staff: Place a copy of this form and screenshot of CCR licensing history within Engage Event Log for applicable status update.

Child Care Program Signature: _____

Date: _____

Texas Rising Star Staff Signature: _____

Date: _____