

Adult Household Members Views

To be completed by all members of the applicants household aged 18 years and over.

1.	Are you in favour of Childminding taking place in your home?			
	Yes		No	
2.	Have you and the prospective childminder discussed what childminding will mean for your family?			
	Yes		No	
	Comment			
3.	What do you think will be the impact of having minded children in your home?			
	Comment			
4.	Are you happy for this application to proceed?			
	Yes		No	
	Comment			

5. Are you aware that no minded child can be left in the care of any adult other than the registered person or approved assistant?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Signed:	<input type="text"/>
Print Name:	<input type="text"/>
Date:	<input type="text"/>
Relationship to Childminder	<input type="text"/>