

Michigan Department of Human Services  
**Bureau of Children and Adult Licensing**  
 REQUEST OF CHILD CARE FORMS

<b>MAIL REQUEST TO:</b>  Department of Human Services Bureau of Children and Adult Licensing P.O. Box 30650 Lansing, MI 48909  Fax: 517-284-9709	<b>MAIL FORMS TO: (REGISTRANT/LICENSEE)</b>	
	Facility Name	
	Name	
	Street Address	
	City/State/Zip	
	Registration/License #	Capacity
Phone #		

All forms and publications may be **downloaded and printed** from our Website:

[www.michigan.gov/michildcare](http://www.michigan.gov/michildcare).

All BCAL forms and publications may be reproduced.

**FAMILY AND GROUP CARE HOMES**

NAME OF FORM	FORM #	QUANTITY
Child Information Record	BCAL-3731	
Child In Care Statement/Receipt	BCAL-3900	
Licensing Rules for Family and Group Care Homes	BCAL PUB 724	

**CHILD CARE CENTERS**

NAME OF FORM	FORM #	QUANTITY
Child Information Record	BCAL-3731	
Licensing Rules for Child Care Centers	BCAL PUB 8	

Health Appraisal [children] (MDCH/BCAL-3305) - This form can only be downloaded and printed from our Web site or ordered from the Department of Community Health, via fax at **517-335-9855**.