



## Quality First Rating Only Agreement

Please submit a signed copy of this form to the Quality First coordinator to accept or decline Quality First Rating Only participation.

Site Name:	Quality First ID#:
Name and Role:	

*Please initial one:*

**I accept Rating Only participation in Quality First.**  
*Proceed to Acknowledgments*

**I decline Rating Only participation in Quality First.** I understand that I must submit a new Quality First application for future selection consideration. *Proceed to Signature*

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**Acknowledgments-** *Please initial each item below.*

I understand participation in Quality First is voluntary and I may elect to decline participation at any time.

I acknowledge that the following components of Quality First **ARE NOT** included in Rating Only participation: Coaching, Child Care Health Consultation and Funding.

I agree to follow all assessment and rating-specific Quality First policies identified in the most recent version of the Quality First Participant Guide.

I will maintain accurate licensing, staffing, and classroom information in my site's Extranet profile.

I understand that I can use the Clarification, Concern, and Appeal process as outlined in the Quality First Participant Guide to address questions or concerns about my Quality First Assessment and Star Rating.

I understand that 1 and 2-star initial ratings are not public unless I submit a [Request for Public Rating form](#) and that 3, 4 and 5-star initial ratings and all

renewal ratings will be public until either the cycle end date or my program declines from Quality First participation.

I understand that my rating will be valid until the cycle end date identified in the Quality First Extranet.

I understand that if funding is unavailable for a renewal assessment, I will be declined from Quality First Rating Only participation after the assessment cycle end date identified in the Quality First Extranet.

I understand that public ratings will be recognized by the Arizona Department of Economic Security for enhanced child care assistance reimbursement and may be recognized by other agencies or programs as determined by their own policies.

I understand that if I am not in good standing with my regulatory agency for over 60 days or if I am not in good standing more than once within 12 months, Rating Only participation in Quality First may be terminated.

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## Signature

By completing this form, the signee certifies that they are authorized to sign on behalf of the participating site, identified above.

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*Name*

*Signature*

*Date*