

# Guide to Completing the Preliminary Information Form (PIF)

This guide will help learners navigate to the licensor packet, located the PIF, complete, and submit the form.

## Step 1: Locate the PIF in the [Licensor Packet \(DHS-7779\)](#)

### Family Systems Applications – Section H

H2 Family Child Care

- [H2a Family Child Care Application DHS-8206 \(7-22\).PDF](#)

H4 & H5 Child Foster Care and Adult Foster Care/Community Residential Settings

- [H4a Application – Minnesota Adoption and Child Foster Care DHS-4258A \(9-22\).PDF](#)
- [H4c Application – Minnesota Corporate Child Foster Care DHS-4258H \(8-17\).PDF](#)
- [H5a Application - FAMILY Adult Foster Care; Family Adult Day Services; Alternate Overnight Supervision Technology.\(1-26\).PDF](#)
- [H5b Supplement to Application – FAMILY Adult Foster Care DHS-8132 \(11-25\)](#)
- [H5c Application - CORPORATE AFC; Community Residential Setting; FADS; Alternate Oversight Technology.\(1-26\).PDF](#)

[H7 Preliminary Information Form \(PIF\) - all license types \(DHS-7779\)](#)

[H8 3324 License Recommendation - all license types](#)

[H9 Withdrawal of License Application DHS-7941 \(3-24\).PDF](#)

[Report this page](#)

## Step 2: Select Family Child Care (FCC)

DHS-7779-ENG 9-22 (1.0.31)

OFFICE OF INSPECTOR GENERAL - LICENSING DIVISION

### Preliminary Information Form (PIF)

The screenshot shows the 'General Information' section of the Preliminary Information Form (PIF). A dropdown menu for '\*License Type' is open, displaying the following options: Adult Foster Care (AFC), Child Foster Care (CFC), Child Foster Residence Setting (CFRS), Community Residential Setting (CRS), Family Adult Day Services (FADS), **Family Child Care (FCC)**, and Special Family Child Care (SFCC). The 'Family Child Care (FCC)' option is highlighted in yellow. The background of the form is light blue, and the dropdown menu is white with a light blue border. At the bottom of the form, there is a footer that reads 'man Services | All rights reserved'.

**TIP:** Bookmark the PIF in your web browser.

### Step 3: Complete the Applicant information section

You will use the information obtained on the Family Child Care License Application (DHS-8206) to fill in this information. Be sure to include both applicants if there are more than one. **Double check for accuracy.** Once all the information is entered click next on the bottom right.

General information

**Applicant information**

Attestation

Applicant 1

\*FIRST NAME \*MIDDLE NAME \*LAST NAME

No middle name

\*STREET ADDRESS

\*CITY \*STATE \*ZIP CODE \*COUNTY

\*EMAIL ADDRESS \*PHONE NUMBER

\*IS A PO BOX REQUIRED FOR MAIL DELIVERY

Yes  No

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Click the + button to add an applicant

### Step 4: Complete the Agency attestation and Submit

**Agency Staff First and Last Name** - person completing the form.

**Assigned Licensor Code** - who the case should be assigned to in ELMS.

**Email Address** - who should receive the confirmation email from DCYF.

**Phone Number** - worker assigned the case.

General information

Applicant information

**Attestation**

### Agency attestation

I declare under the penalty of perjury that everything I have stated in this document is true and correct. By signing my name in the "Licensor Signature" field, I understand that I am electronically signing this form. I attest and certify that the information provided above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)


\* AGENCY STAFF FIRST NAME


\* AGENCY STAFF LAST NAME

\* ASSIGNED LICENSOR CODE

\* EMAIL ADDRESS

\* PHONE NUMBER

TODAY'S DATE  

\* AGENCY STAFF SIGNATURE 

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