



Charlie Crist  
Governor

Ana M. Viamonte Ros, M.D., M.P.H.  
State Surgeon General

**PINELLAS COUNTY HEALTH DEPARTMENT  
Child Care Licensing Program**

---

**REQUEST TO MAKE A PRESENTATION TO  
THE PINELLAS COUNTY LICENSE BOARD FOR  
CHILDREN'S CENTERS AND FAMILY CHILD CARE HOMES**

NAME(S) \_\_\_\_\_

REPRESENTING \_\_\_\_\_

ADDRESS \_\_\_\_\_

PURPOSE OF  
PRESENTATION \_\_\_\_\_

Time allowed: Up to 10 minutes

The procedure for addressing the Pinellas County License Board for Children's Centers and Family Child Care Homes requires that this application be submitted together with any written documentation at least **10 days prior to** the License Board meeting date to:

Dana Stajkowski, Administrative Secretary  
Pinellas County Health Department Child Care Licensing Program  
4175 East Bay Drive, Suite 350  
Clearwater, FL 33781  
727-507-4857 Phone  
727-5074858 Fax  
Dana\_Stajkowski@doh.state.fl.us

If you are a person with a disability who needs an accommodation in order to participate in this meeting, you are entitled, at no cost to you, to the provision of certain assistance. Notify our office when you submit this request.

6/10