



South Dakota
Department of
Social Services

Strong Families - South Dakota's Foundation and Our Future

LICENSE TO OPERATE

This license is hereby granted to **<Provider Legal Entity Name>** to operate **<Provider Location Name>** located at **<Provider Location Address Line 1, Line 2, City, State, Zip Code>** to provide child care services.

This license is granted in accordance with the Department of Human Services 28 XX. Code, Part IV, Subpart F. Chapter 601.

This license was issued on **<License Issue Date>** and shall remain in effect from **<License Issue Date>** to **<License Expiration Date>** unless sooner revoked for non-compliance with applicable laws and regulations.

License #: **<License number>** and Provider ID: **< Program ID>**

Dr. Mike Shaw
Licensing Manager

John Doe
Executive Deputy Secretary

NOTE: This Certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.