



MASP *Committed to Quality* Recognition

Name of program _____

Address _____

City _____ State _____ ZIP _____

Email address _____ Contact person _____

Our program has been evaluated using the *Model Standards for Out-of-School Time/After-School Programs in Michigan Self-Assessment Checklist*

We have determined that the indicators of high-quality are in place for the following identified critical components for out-of-school time programs:

- Health, Safety, and Nutrition;
- Human Relationships and Staffing;
- Indoor and Outdoor Environment;
- Program and Activities;
- Administration; and
- Single-Purpose Programs (if applicable)

Practice of which we are particularly proud: (Insert a practice that your program follows that may be shared with other programs as a promising practice with others. Feel free to also attach video or photos.)

Director or CEO

Date

Please return to:

Michigan After-School Partnership | 1627 Lake Lansing Road Ste. B | Lansing, MI 48912
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