

ARISE Provider Portal – Applying for an Out-of-School/University License Exemption

Once Provider's register on the Provider Portal, they can apply for a license or exemption, as per their provider type, using the portal.

How to apply for license exemption as an out-of-school/university childcare provider?

The following is a quick step-by-step guide to begin and submit your license exemption application as an out-of-school/university childcare provider!

Following the standard registration process, ensure that you select 'out-of-school' or 'university' as the Provider type, when registering as a Provider (please refer to the Quick Reference Guide on Registration or to the Provider User Manual for further details on this).

Once you have completed the registration, having selected 'out-of-school' or 'university', logging in with your email ID and password will lead to the following landing page:

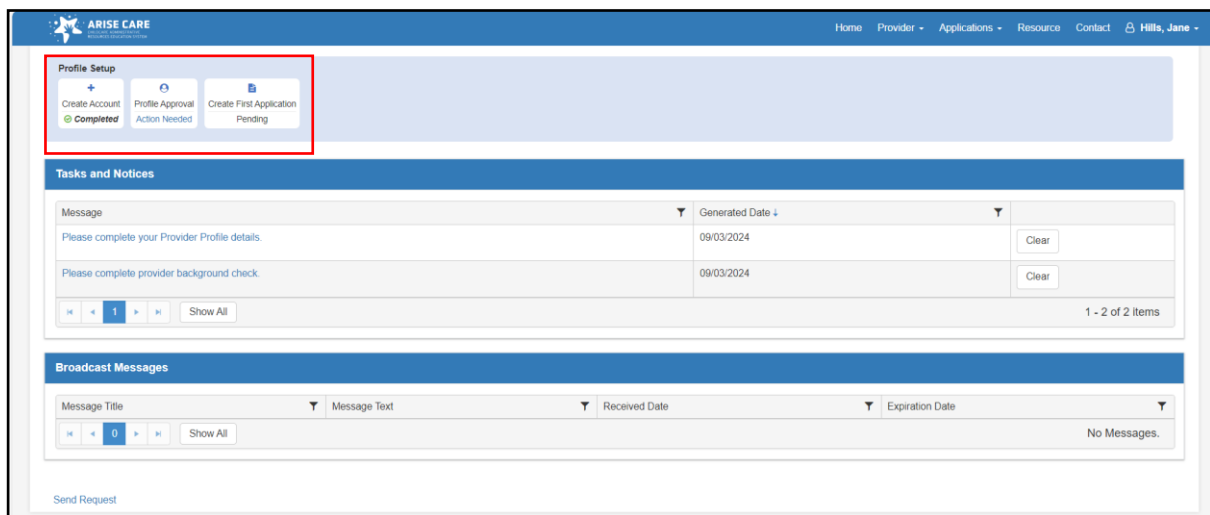


Figure 1: Landing Page

The landing page is the first page that you see when you log in to the provider portal. This is the screen where you will be able to see your progress, receive notices and messages, and complete the steps required to submit your application.

On the landing page, you will see an application wizard at the top, containing a set of steps. These are the various steps to be completed when submitting your license exemption application.

The process is as follows:

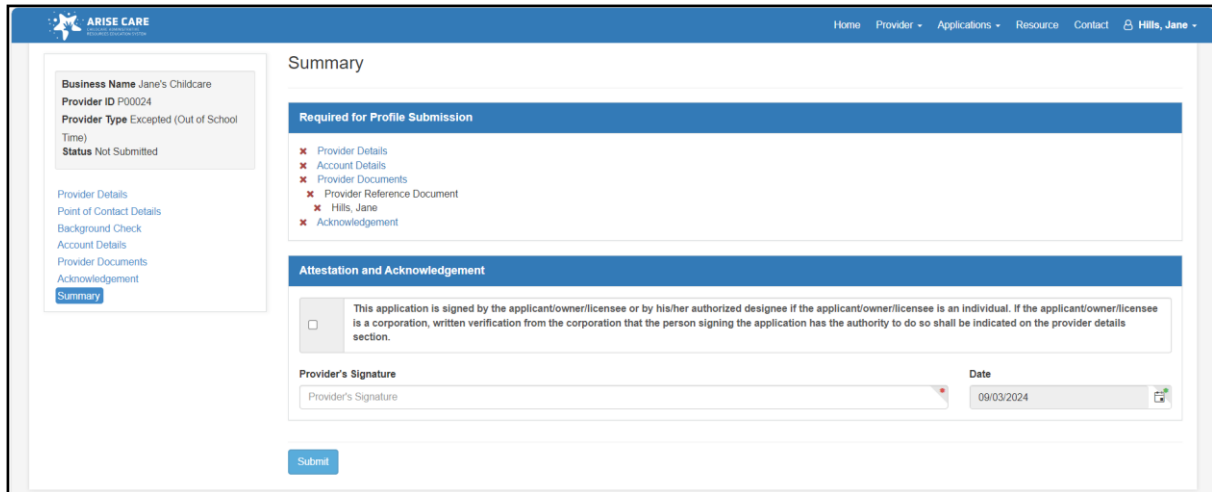
1. Complete Provider Profile
2. Initiate License Exemption Application

Step One: Provider Profile

How to Complete Provider Profile?

To complete your Provider Profile:

1. Click on the 'Action Needed' link in the first step of the application wizard – 'Profile Approval', to be directed to the following page:



The screenshot shows the 'Summary' page of the ARISE CARE Provider Portal. The page has a blue header with the ARISE CARE logo and navigation links: Home, Provider, Applications, Resource, Contact, and a user profile for Hills, Jane. On the left, a sidebar lists the application steps: Business Name, Provider ID, Provider Type, Status, Provider Details, Point of Contact Details, Background Check, Account Details, Provider Documents, Acknowledgement, and Summary (which is highlighted). The main content area is titled 'Summary' and contains two sections: 'Required for Profile Submission' and 'Attestation and Acknowledgement'. The 'Required for Profile Submission' section lists five items, each with a red 'x' icon: Provider Details, Account Details, Provider Documents, Provider Reference Document, and Hills, Jane. The 'Attestation and Acknowledgement' section contains a checkbox for 'This application is signed by the applicant/owner/licensee or by his/her authorized designee...' and a 'Provider's Signature' field with a 'Date' field set to 09/03/2024. A 'Submit' button is at the bottom.

Figure 2: Summary Page

The Summary Page depicts a list of actionable items that must be completed in order to finish your profile. At the end of the process, each item must have a green tick to indicate that it has been completed.

2. You may click on each item on the list OR use the navigation pane on the left.
3. Click on 'Provider Details' on the left, to be taken to the following page:

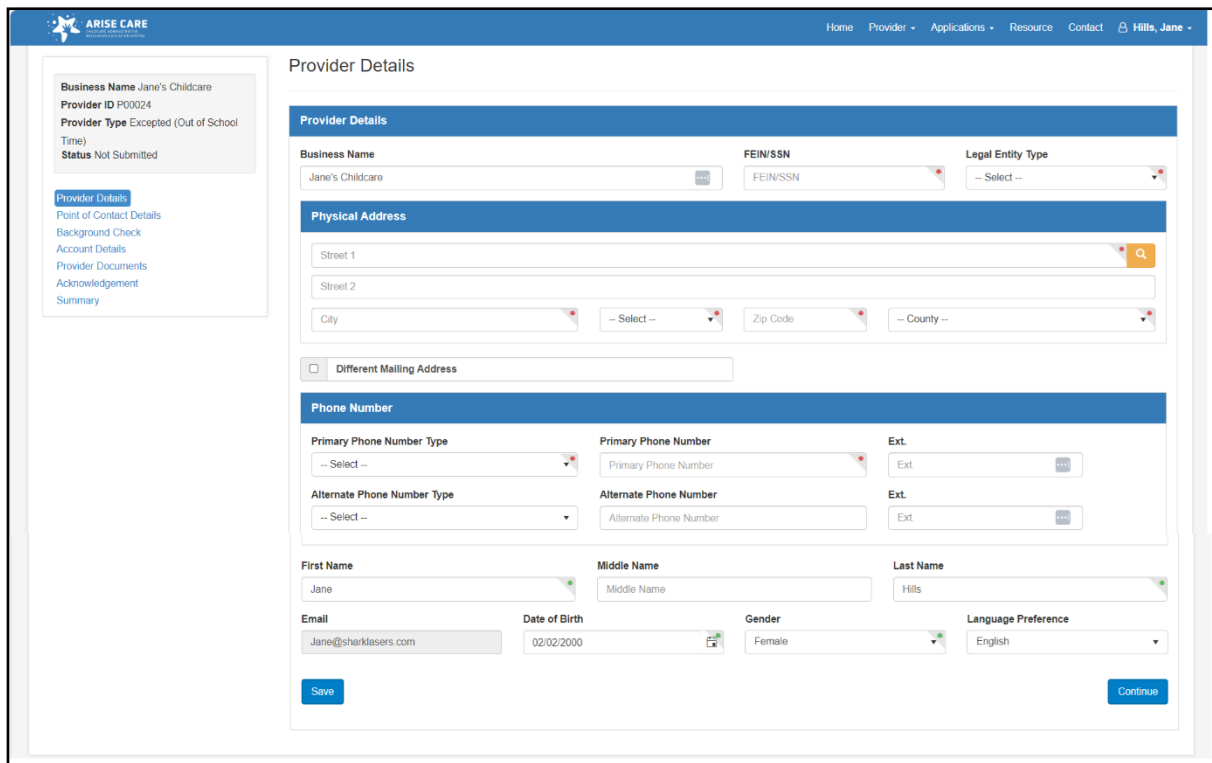


Figure 3: Provider Details Page

4. On this page, fill in all mandatory details (marked by a red asterisk on the top right corner of the respective fields).
5. Click on 'save' once all details have been filled in.
6. To proceed, click on the 'Continue' button on the bottom right of the page

OR

Click on 'Point of Contact Details' on the left navigation pane to be redirected to the following page:

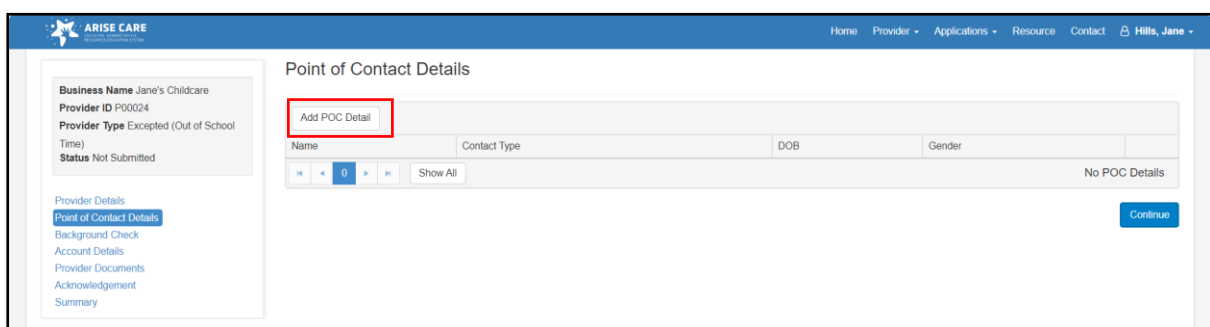
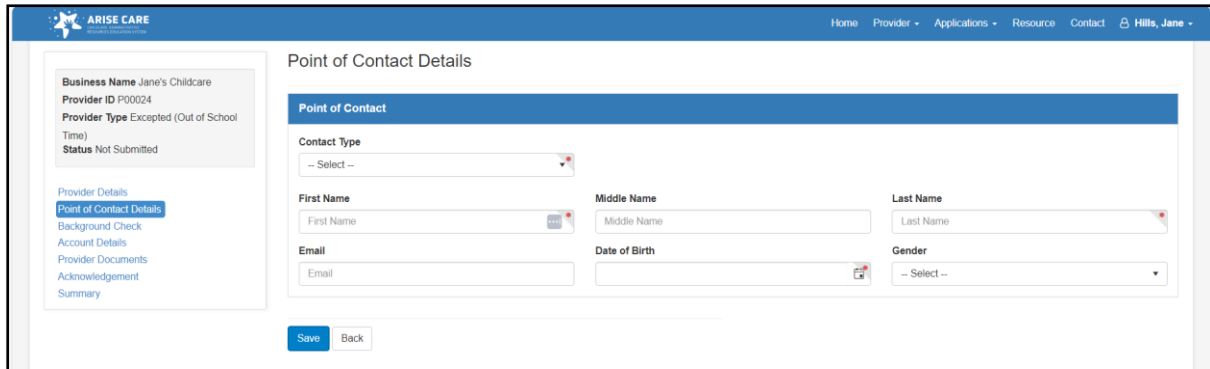


Figure 4: Point of Contact Details Grid

To add point of contact details:

1. Click on the 'Add POC Detail' button on the grid (refer to Figure 4), to be redirected to the following form:



ARISE CARE CHILDCARE ADMINISTRATIVE RESOURCES EDUCATION SYSTEM

Home Provider Applications Resource Contact Hills, Jane

Business Name Jane's Childcare
Provider ID P00024
Provider Type Excepted (Out of School Time)
Status Not Submitted

Provider Details
 Point of Contact Details
 Background Check
 Account Details
 Provider Documents
 Acknowledgement
 Summary

Point of Contact Details

Point of Contact

Contact Type
 -- Select --

First Name
 First Name

Middle Name
 Middle Name

Last Name
 Last Name

Email
 Email

Date of Birth
 Date of Birth

Gender
 -- Select --

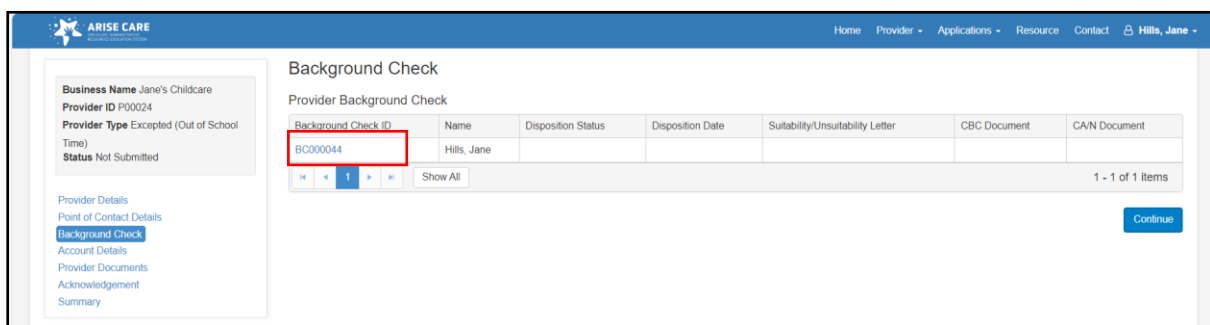
Save Back

Figure 5: Point of Contact Details Form

2. Add all mandatory details
3. Click on 'Save' to save your information and be directed back to the Point of Contact Details Grid (Figure 4)
4. Click on the 'Continue' button on the bottom right of the page

OR

Click on the next section on the navigation pane – Background Check. This action will lead you to the following page:



ARISE CARE CHILDCARE ADMINISTRATIVE RESOURCES EDUCATION SYSTEM

Home Provider Applications Resource Contact Hills, Jane

Business Name Jane's Childcare
Provider ID P00024
Provider Type Excepted (Out of School Time)
Status Not Submitted

Provider Details
 Point of Contact Details
 Background Check
 Account Details
 Provider Documents
 Acknowledgement
 Summary

Background Check

Provider Background Check

Background Check ID	Name	Disposition Status	Disposition Date	Suitability/Unsuitability Letter	CBC Document	CA/N Document
BC000044	Hills, Jane					

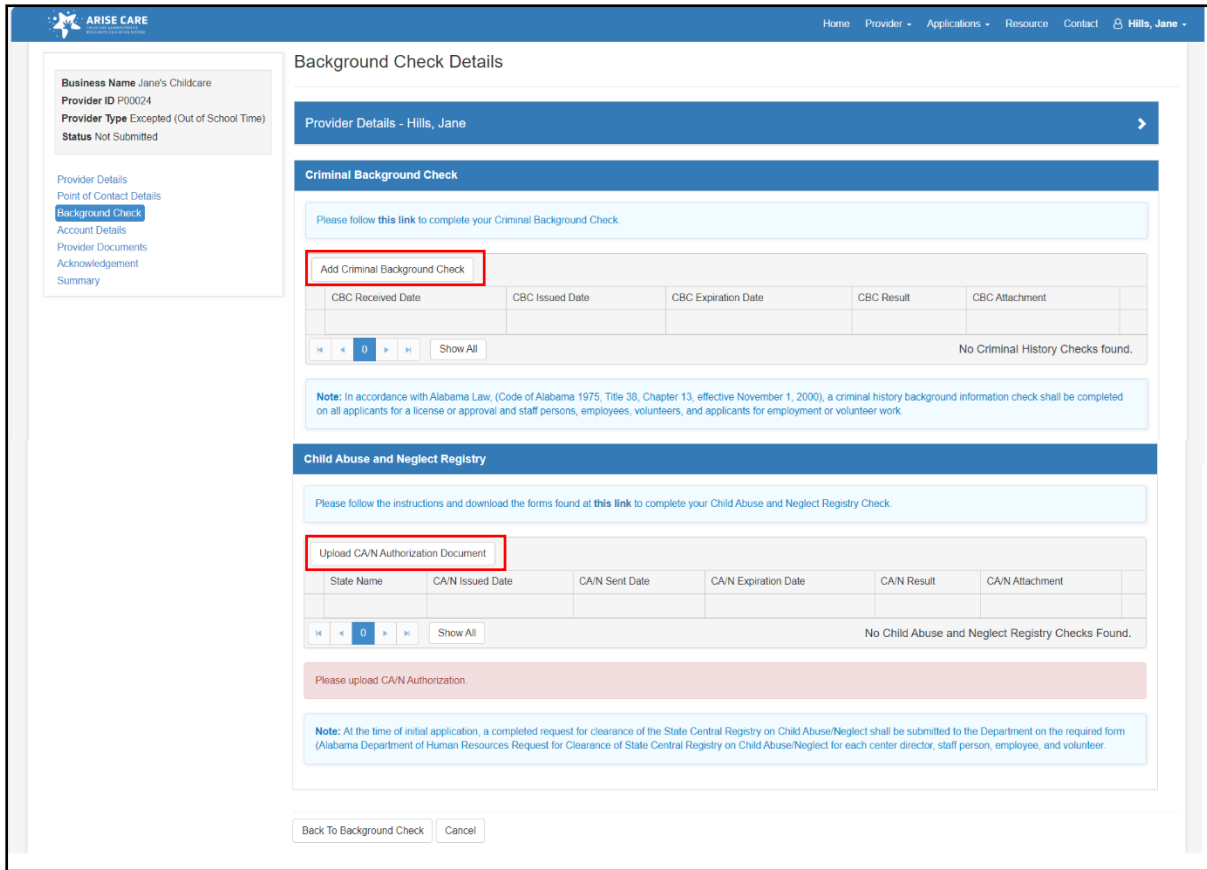
1 - 1 of 1 items

Continue

Figure 6: Background Check Summary Page

On this page:

1. Click on the Background Check ID to be redirected to the following page:



Background Check Details

Business Name Jane's Childcare
 Provider ID P00024
 Provider Type Excepted (Out of School Time)
 Status Not Submitted

Provider Details
 Point of Contact Details
Background Check
 Account Details
 Provider Documents
 Acknowledgement
 Summary

Provider Details - Hills, Jane

Criminal Background Check

Please follow this link to complete your Criminal Background Check.

Add Criminal Background Check

CBC Received Date	CBC Issued Date	CBC Expiration Date	CBC Result	CBC Attachment
No Criminal History Checks found.				

Note: In accordance with Alabama Law, (Code of Alabama 1975, Title 38, Chapter 13, effective November 1, 2000), a criminal history background information check shall be completed on all applicants for a license or approval and staff persons, employees, volunteers, and applicants for employment or volunteer work.

Child Abuse and Neglect Registry

Please follow the instructions and download the forms found at this link to complete your Child Abuse and Neglect Registry Check.

Upload CA/N Authorization Document

State Name	CA/N Issued Date	CA/N Sent Date	CA/N Expiration Date	CA/N Result	CA/N Attachment
No Child Abuse and Neglect Registry Checks Found.					

Please upload CA/N Authorization

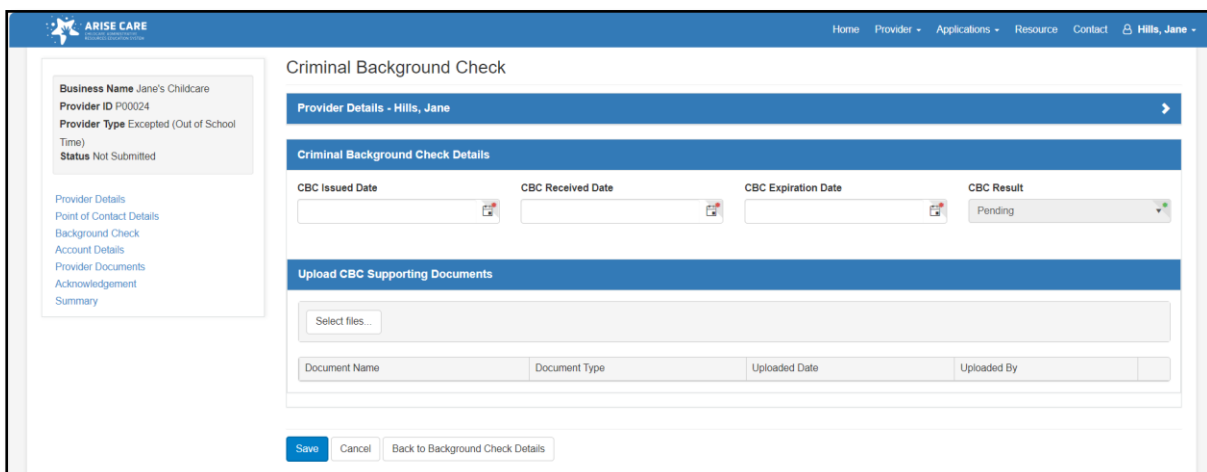
Note: At the time of initial application, a completed request for clearance of the State Central Registry on Child Abuse/Neglect shall be submitted to the Department on the required form (Alabama Department of Human Resources Request for Clearance of State Central Registry on Child Abuse/Neglect for each center director, staff person, employee, and volunteer)

Back To Background Check Cancel

Figure 7: Add Background Check Details Page

Here, you are expected to fill in your 'Criminal Background Check' details, as well as your 'Child Abuse and Neglect Registry' details.

- To complete this – first click on 'Add Criminal Background Check' to be redirected to the following screen:



Criminal Background Check

Provider Details - Hills, Jane

Criminal Background Check Details

CBC Issued Date	CBC Received Date	CBC Expiration Date	CBC Result
			Pending

Upload CBC Supporting Documents

Select files...

Document Name	Document Type	Uploaded Date	Uploaded By

Save Cancel Back to Background Check Details

Figure 8: Criminal Background Check Page

- On this page, fill in all mandatory details and click 'save' to proceed (marked by a red asterisk on the top right corner of the field).
- Ensure that you upload relevant documents as well (if any).

- Click on 'Back to Background Check Details' to return to the Background Check Details Page (Figure 7).

To complete the next part of the background check:

- Click on 'Upload CA/N Authorization Document' (refer to Figure 7) to be redirected to the following screen:

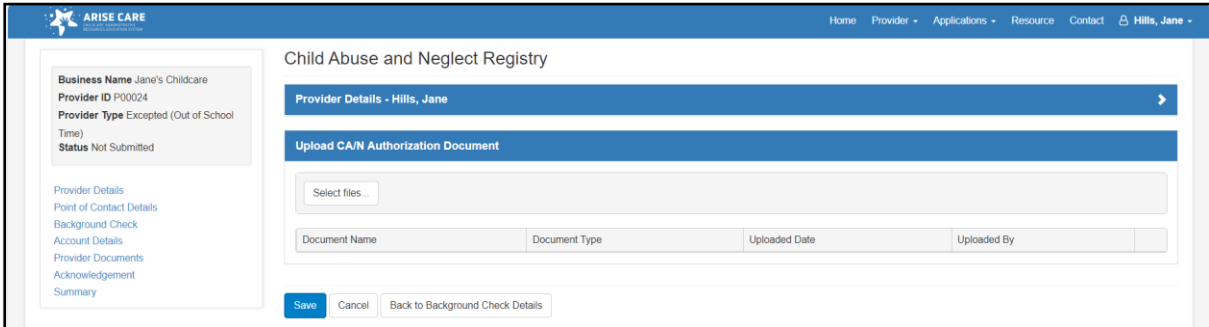


Figure 9: Child Abuse and Neglect Registry

- On this page, upload the required documents and click 'save' to proceed
- Click on 'Back to Background Check Details' to return to the Background Check Summary Page (Figure 7).
- Click on the 'Submit' button that now appears:



Figure 10: Submit Button

To proceed to the next stage:

- Click on the next section on the navigation pane – Account Details. This action will direct you to the following page:

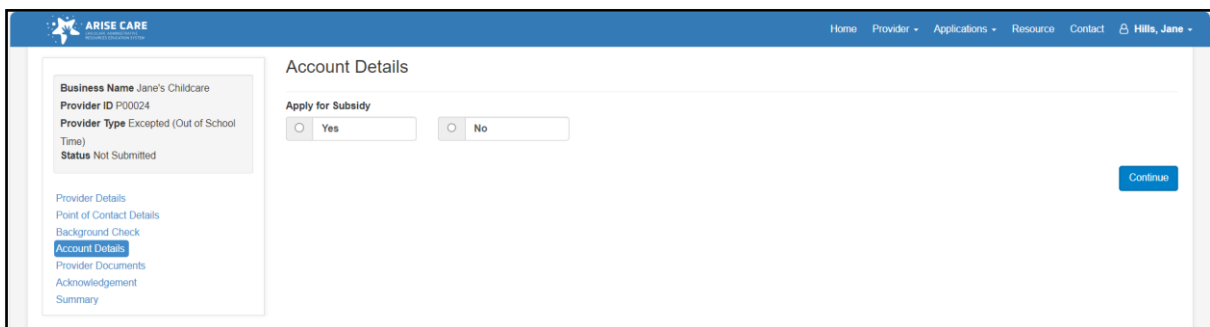


Figure 11: Account Details Page

On this page, you will see options regarding whether you would like to apply for a subsidy as well, or not. Select the appropriate option to proceed and fill in any additional details based on whether your response is 'yes' or 'no'.

Please refer to the Quick Reference Guide on applying for a provider subsidy, or to the full Provider Portal manual for further details on how to fill in this section.

Once this section has been completed, you may move on to the next section on the navigation pane – Provider Documents.

To proceed:

1. Click on the 'Provider Documents' link on the navigation pane. This action will direct you to the following page:

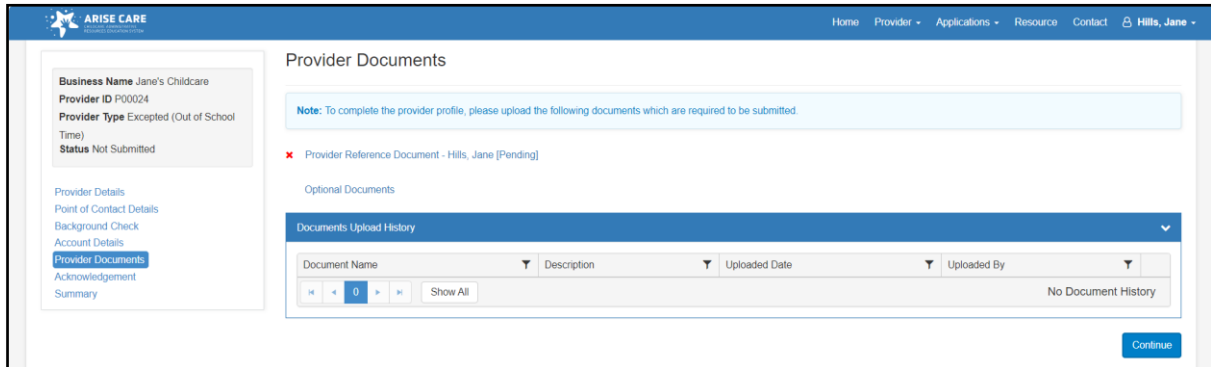


Figure 12: Provider Documents Page

2. On this page, upload all relevant documents by clicking on the respective links and clicking on the 'select file' button.
3. On uploading the documents, you will see that the red cross next to each item turns green, as follows:

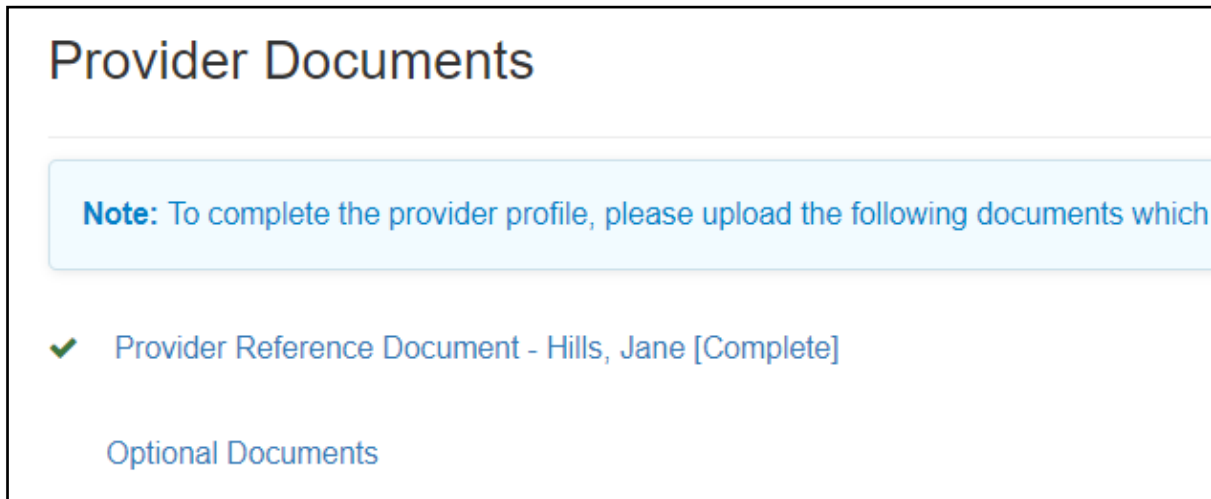
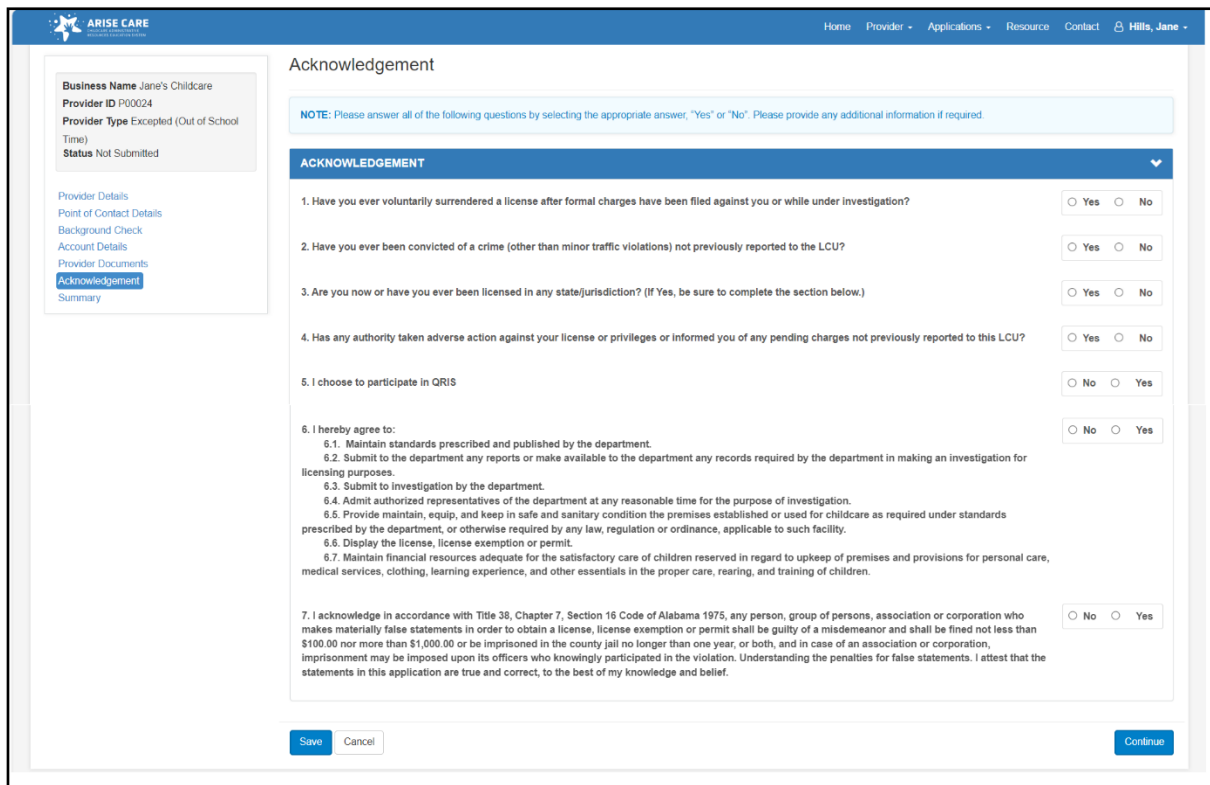


Figure 13: Uploaded Provider Documents Page

To proceed from here:

1. Click on 'Acknowledgement' on the left navigation pane to be directed to the following page:



ARISE CARE CHILD CARE ADMINISTRATIVE RESOURCES EDUCATION SYSTEM

Home Provider Applications Resource Contact Hills, Jane

Business Name Jane's Childcare
Provider ID P00024
Provider Type Excepted (Out of School Time)
Status Not Submitted

Provider Details
 Point of Contact Details
 Background Check
 Account Details
 Provider Documents
Acknowledgement
 Summary

Acknowledgement

NOTE: Please answer all of the following questions by selecting the appropriate answer, "Yes" or "No". Please provide any additional information if required.

ACKNOWLEDGEMENT

- Have you ever voluntarily surrendered a license after formal charges have been filed against you or while under investigation? ☐ Yes ☐ No
- Have you ever been convicted of a crime (other than minor traffic violations) not previously reported to the LCU? ☐ Yes ☐ No
- Are you now or have you ever been licensed in any state/jurisdiction? (If Yes, be sure to complete the section below.) ☐ Yes ☐ No
- Has any authority taken adverse action against your license or privileges or informed you of any pending charges not previously reported to this LCU? ☐ Yes ☐ No
- I choose to participate in QRIS ☐ No ☐ Yes
- I hereby agree to:
 - Maintain standards prescribed and published by the department.
 - Submit to the department any reports or make available to the department any records required by the department in making an investigation for licensing purposes.
 - Submit to investigation by the department.
 - Admit authorized representatives of the department at any reasonable time for the purpose of investigation.
 - Provide maintain, equip, and keep in safe and sanitary condition the premises established or used for childcare as required under standards prescribed by the department, or otherwise required by any law, regulation or ordinance, applicable to such facility.
 - Display the license, license exemption or permit.
 - Maintain financial resources adequate for the satisfactory care of children reserved in regard to upkeep of premises and provisions for personal care, medical services, clothing, learning experience, and other essentials in the proper care, rearing, and training of children.
- I acknowledge in accordance with Title 38, Chapter 7, Section 16 Code of Alabama 1975, any person, group of persons, association or corporation who makes materially false statements in order to obtain a license, license exemption or permit shall be guilty of a misdemeanor and shall be fined not less than \$100.00 nor more than \$1,000.00 or be imprisoned in the county jail no longer than one year, or both, and in case of an association or corporation, imprisonment may be imposed upon its officers who knowingly participated in the violation. Understanding the penalties for false statements. I attest that the statements in this application are true and correct, to the best of my knowledge and belief. ☐ No ☐ Yes

Save **Cancel** **Continue**

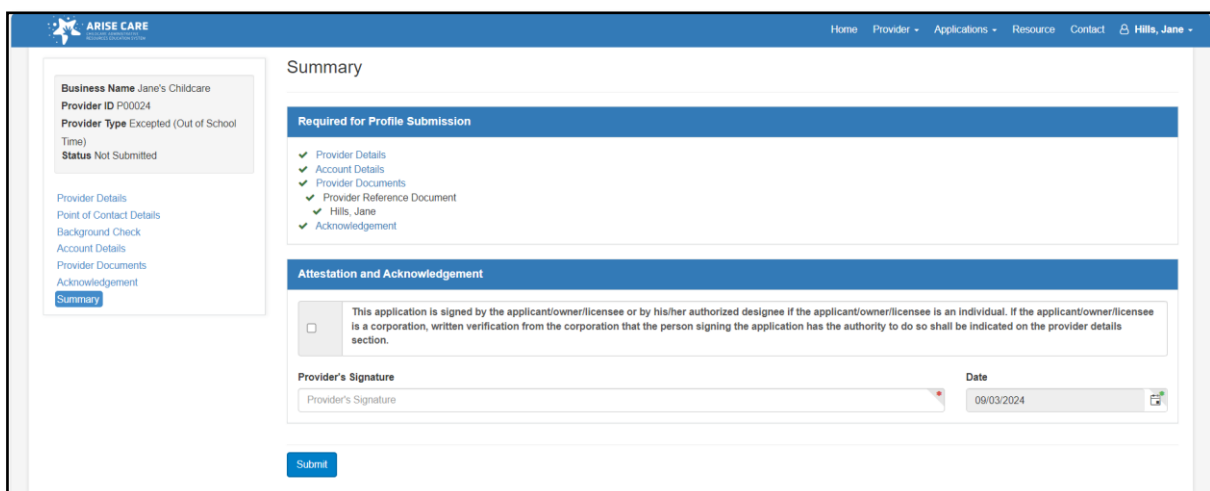
Figure 14: Acknowledgement Page

On this page, you will see a list of questions that you will need to respond to with either 'yes' or 'no'. In some cases, your response may result in a mandatory description box appearing, which will need to be filled with an explanation regarding your response.

Once you have finished answering the questions, click on 'save' to save your progress.

To proceed, click on the next link on the navigation pane – Summary.

This action will lead you back to the first summary page, as follows:



ARISE CARE CHILD CARE ADMINISTRATIVE RESOURCES EDUCATION SYSTEM

Home Provider Applications Resource Contact Hills, Jane

Business Name Jane's Childcare
Provider ID P00024
Provider Type Excepted (Out of School Time)
Status Not Submitted

Provider Details
 Point of Contact Details
 Background Check
 Account Details
 Provider Documents
 Acknowledgement
Summary

Summary

Required for Profile Submission

- ✓ Provider Details
- ✓ Account Details
- ✓ Provider Documents
- ✓ Provider Reference Document
- ✓ Hills, Jane
- ✓ Acknowledgement

Attestation and Acknowledgement

☐ This application is signed by the applicant/owner/licensee or by his/her authorized designee if the applicant/owner/licensee is an individual. If the applicant/owner/licensee is a corporation, written verification from the corporation that the person signing the application has the authority to do so shall be indicated on the provider details section.

Provider's Signature **Date**

Provider's Signature 09/03/2024

Submit

Figure 15: Summary Page

This time, you will see that the list depicts green ticks instead of red crosses. This indicates that all relevant items have been completed.

To proceed:

1. Click on the Attestation and Acknowledgement checkbox to accept.
2. Fill in your signature.
3. Ensure that the pre-filled date is correct.
4. Click on 'submit'.

Congratulations! You have successfully submitted your Provider Profile for Approval!

Step Two: Initiate License Exemption Application

While you wait for your profile to be approved, it's time to move on to the next step – Initiating your License Exemption Application!

How to begin your License Exemption Application?

1. Click on the 'Home' module at the top of the page to be redirected to landing screen.
2. On the landing screen, click on the 'Action Needed' link in the second step – Create First Application – of the application wizard. You will be redirected to the following page:

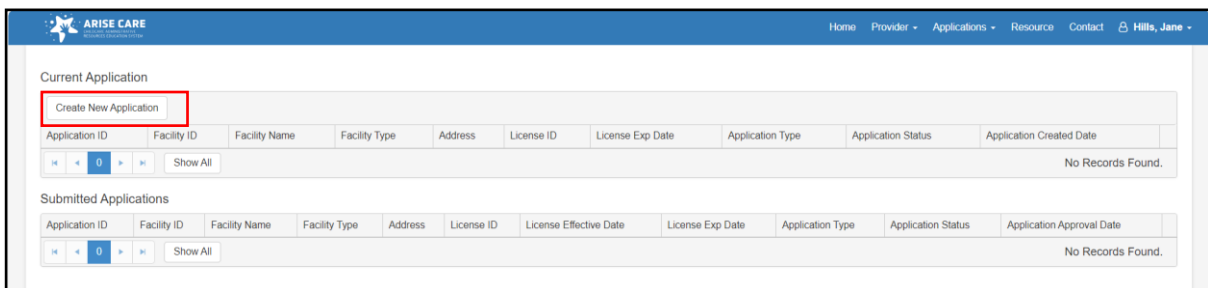
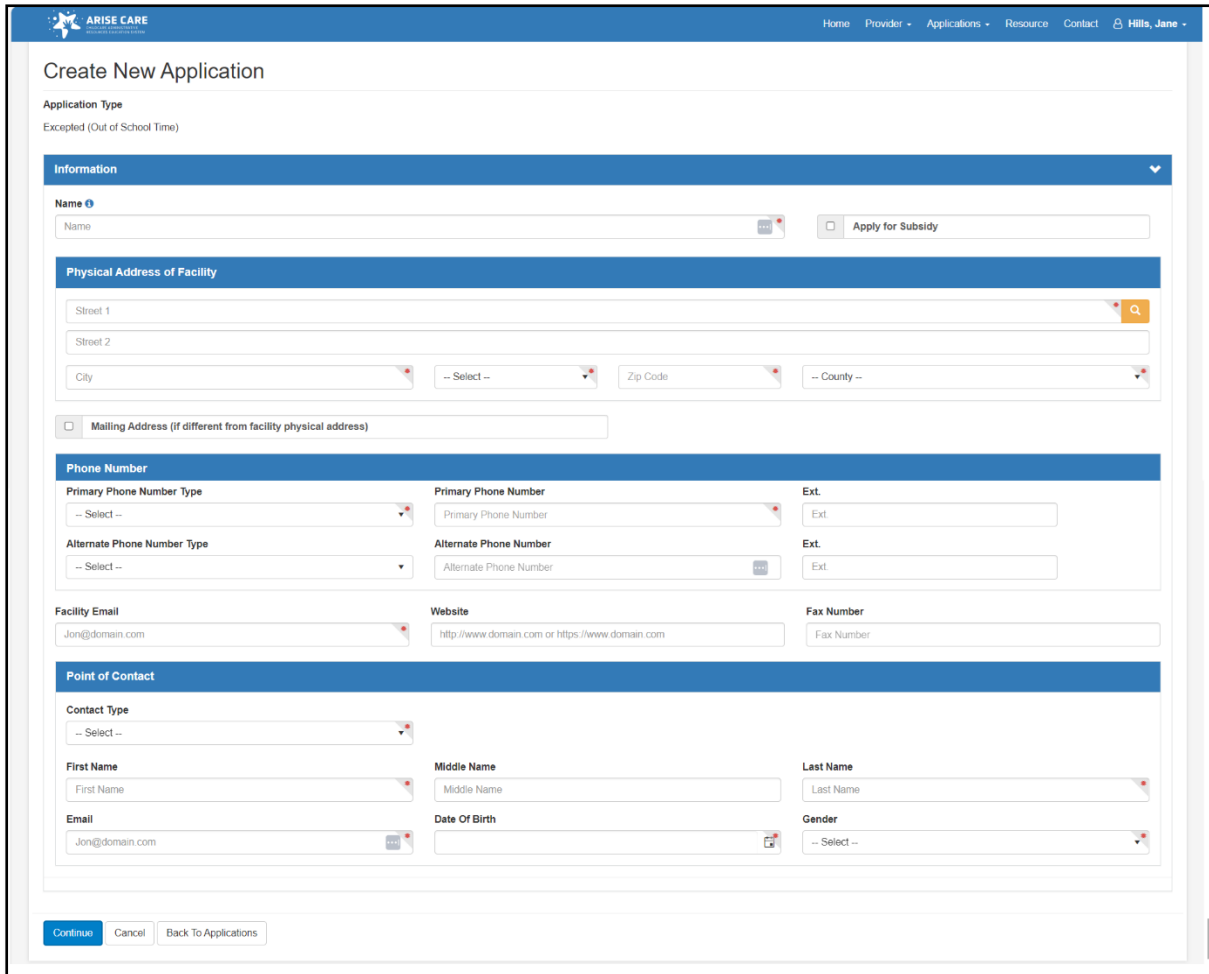


Figure 16: License Application Page



3. Click on the 'Create New Application' button to be redirected to the following page:








Create New Application

Application Type
Excepted (Out of School Time)

Information







Name 
Name  ☐ Apply for Subsidy




Physical Address of Facility

Street 1 
Street 2
City  -- Select --  Zip Code  -- County -- 


☐ Mailing Address (if different from facility physical address)










Phone Number

Primary Phone Number Type  Primary Phone Number  Ext. 
Alternate Phone Number Type  Alternate Phone Number  Ext. 

Facility Email  Website  Fax Number 
Jon@domain.com http://www.domain.com or https://www.domain.com Fax Number

Point of Contact

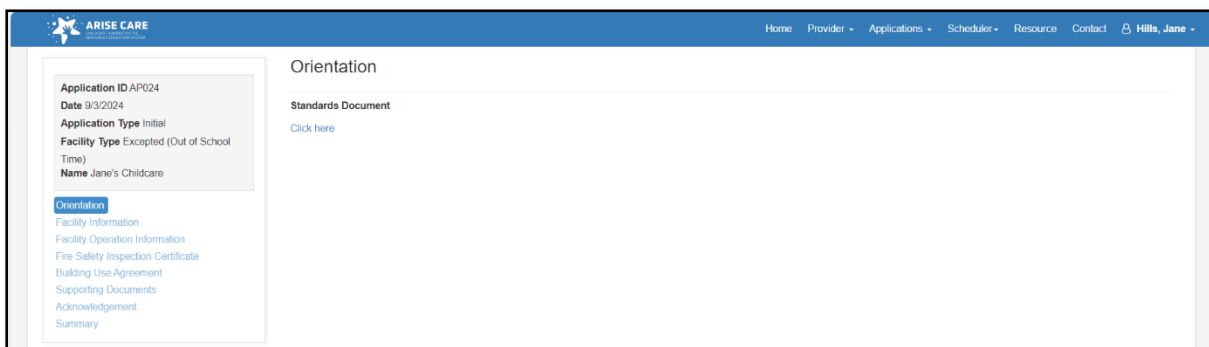
Contact Type  -- Select --

First Name  Middle Name  Last Name 
Email  Date Of Birth  Gender 
Jon@domain.com   -- Select -- 

[Continue](#) [Cancel](#) [Back To Applications](#)

Figure 17: Application Details Page

4. Fill in all mandatory fields and click on 'Continue' to move to the next page:



Orientation

Standards Document
[Click here](#)

Application ID AP024
Date 9/3/2024
Application Type Initial
Facility Type Excepted (Out of School Time)
Name Jane's Childcare

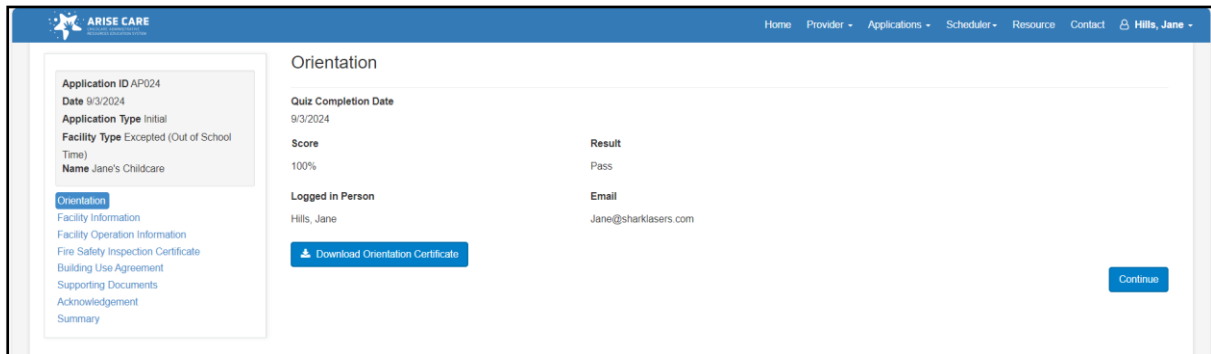
Orientation
Facility Information
Facility Operation Information
Fire Safety Inspection Certificate
Building Use Agreement
Supporting Documents
Acknowledgement
Summary

Figure 18: Orientation Page

5. Click on the link to download the orientation material.
6. Go through the material thoroughly and then return to this page.
7. Click on the link to take the Orientation Quiz.

Select correct answers, based on the material, to successfully complete the orientation quiz and proceed to the next step (Remember – you only get three tries and at least 80% of your responses need to be accurate!)

On successfully completing the quiz, you will see the following screen:



The screenshot shows the 'Orientation' section of the ARISE CARE portal. On the left is a navigation pane with links: Orientation, Facility Information, Facility Operation Information, Fire Safety Inspection Certificate, Building Use Agreement, Supporting Documents, Acknowledgement, and Summary. The 'Orientation' link is highlighted. The main content area displays the following information:

- Application ID:** AP024
- Date:** 9/3/2024
- Application Type:** Initial
- Facility Type:** Excepted (Out of School Time)
- Name:** Jane's Childcare
- Quiz Completion Date:** 9/3/2024
- Score:** 100%
- Result:** Pass
- Logged In Person:** Hills, Jane
- Email:** Jane@sharklasers.com

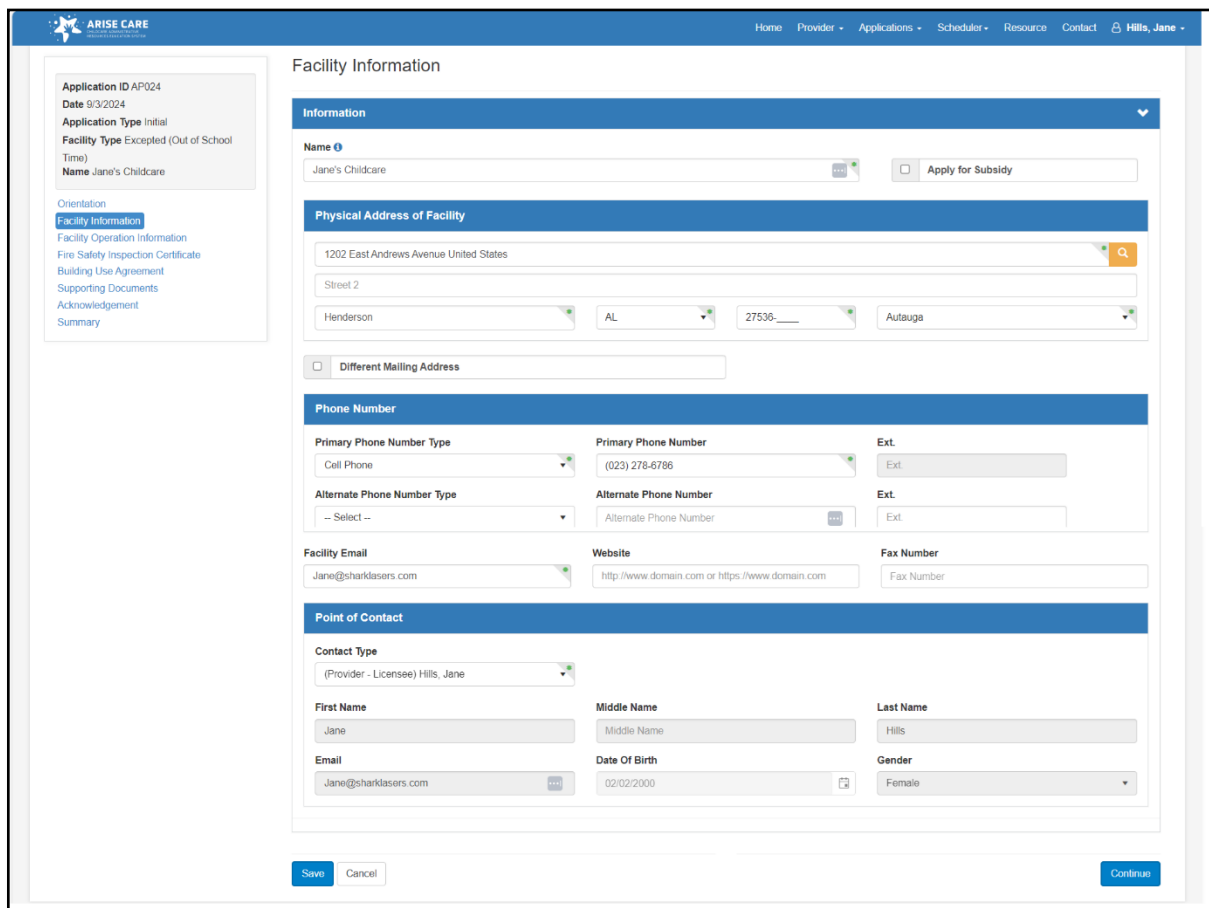
There are two buttons at the bottom: 'Download Orientation Certificate' and 'Continue'.

Figure 19: Completed Orientation Quiz

Notice that the items on the navigation pane on the left are now clickable!

The next part of the process is clicking on each link on the navigation pane to complete the necessary steps to submit your application.

1. First, click on 'Facility Information', to be directed to the following screen:



The screenshot shows the 'Facility Information' page. The navigation pane on the left is the same as in Figure 19, but 'Facility Information' is now highlighted. The main content area contains the following sections:

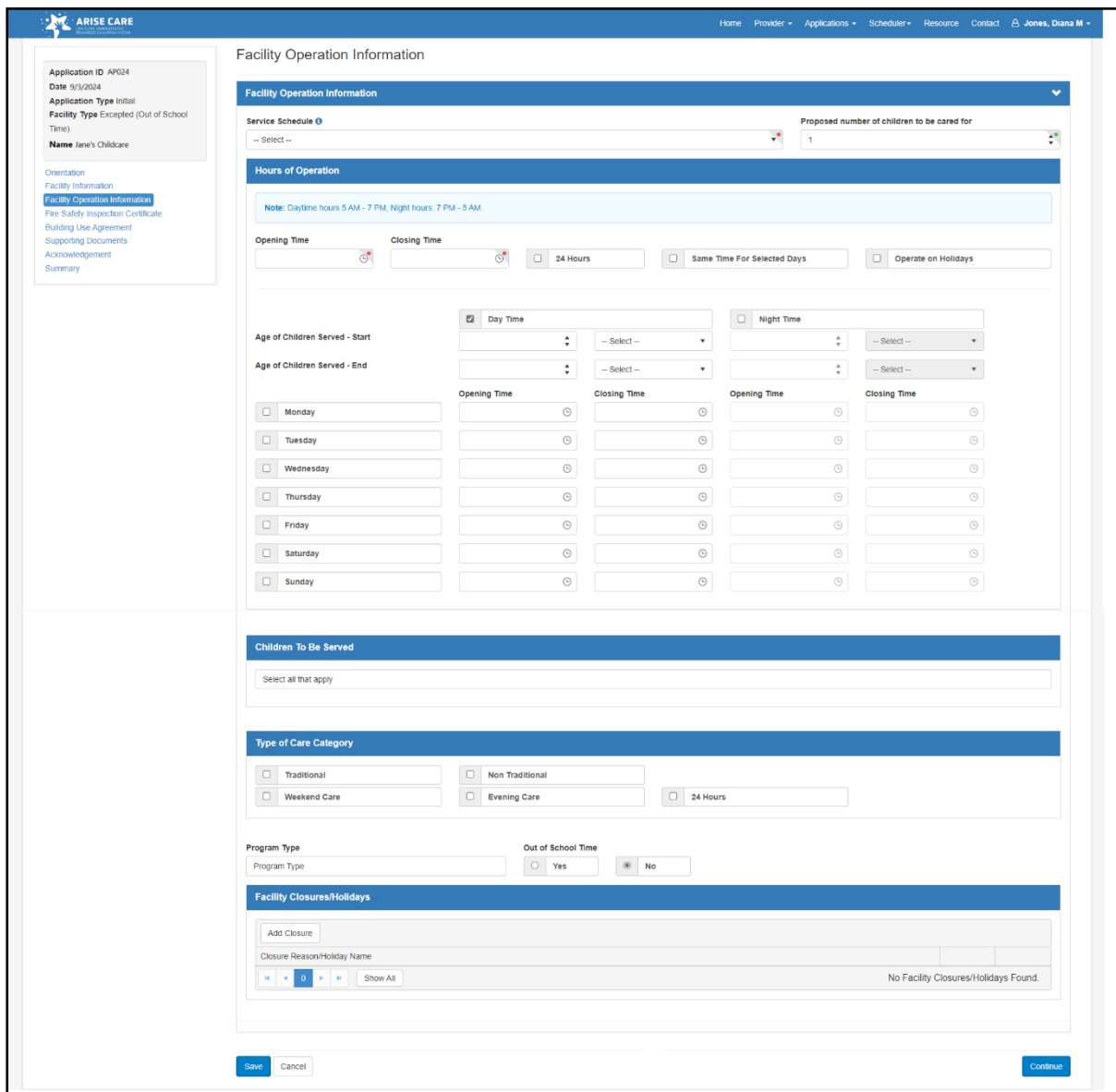
- Information:**
 - Name:** Jane's Childcare
 - ☐ Apply for Subsidy
- Physical Address of Facility:**
 - 1202 East Andrews Avenue United States
 - Street 2
 - Henderson AL 27536 Autauga
 - ☐ Different Mailing Address
- Phone Number:**
 - Primary Phone Number Type:** Cell Phone
 - Primary Phone Number:** (023) 278-6786
 - Ext.:**
 - Alternate Phone Number Type:** -- Select --
 - Alternate Phone Number:**
 - Ext.:**
- Facility Email:** Jane@sharklasers.com
- Website:** http://www.domain.com or https://www.domain.com
- Fax Number:**
- Point of Contact:**
 - Contact Type:** (Provider - Licensee) Hills, Jane
 - First Name:** Jane
 - Middle Name:** Middle Name
 - Last Name:** Hills
 - Email:** Jane@sharklasers.com
 - Date Of Birth:** 02/02/2000
 - Gender:** Female

At the bottom, there are 'Save', 'Cancel', and 'Continue' buttons.

Figure 20: Facility Information Page

2. Double-check all pre-filled information, based on your earlier responses.
3. Add any missing mandatory information (marked by the red asterisk).
4. Click on 'save' to save your progress.

- To proceed, click on 'Facility Operation Information' on the navigation pane, to be directed to the following screen:



Facility Operation Information

Application ID: AP024
Date: 9/3/2024
Application Type: Initial
Facility Type: Excepted (Out of School Time)
Name: Jane's Childcare

Orientation
Facility Information
Facility Operation Information
Fire Safety Inspection Certificate
Building Use Agreement
Supporting Documents
Acknowledgement
Summary

Facility Operation Information

Service Schedule: -- Select -- Proposed number of children to be cared for: 1

Hours of Operation

Note: Daytime hours 5 AM - 7 PM, Night hours: 7 PM - 5 AM

Opening Time: Closing Time: ☐ 24 Hours ☐ Same Time For Selected Days ☐ Operate on Holidays

☒ Day Time ☐ Night Time

Age of Children Served - Start: -- Select --
Age of Children Served - End: -- Select --

	Opening Time	Closing Time	Opening Time	Closing Time
<input type="checkbox"/> Monday				
<input type="checkbox"/> Tuesday				
<input type="checkbox"/> Wednesday				
<input type="checkbox"/> Thursday				
<input type="checkbox"/> Friday				
<input type="checkbox"/> Saturday				
<input type="checkbox"/> Sunday				

Children To Be Served

Select all that apply

Type of Care Category

☐ Traditional ☐ Non Traditional ☐ Weekend Care ☐ Evening Care ☐ 24 Hours

Program Type

Program Type: Out of School Time: ☐ Yes ☒ No

Facility Closures/Holidays

Add Closure

Closure Reason/Holiday Name		

No Facility Closures/Holidays Found.

Save Cancel Continue

Figure 21: Facility Operation Page

On this screen:

- Fill in all mandatory information, including the planned schedule, operation timings, the age groups of children who will be eligible to be enrolled in your facility, and other fields.
- Click on the 'save' button to save and move on to the next step.
- To proceed, click on the next link on the navigation pane – 'Fire Safety Inspection Certificate' – to be redirected to the following page:

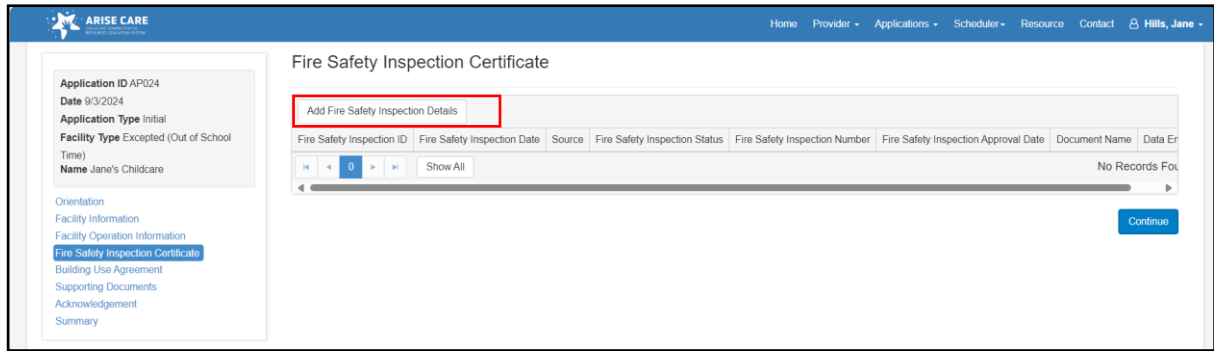


Figure 22: Fire Safety Inspection Certificate Page

On this page, click on the 'Add Fire Safety Inspection Details' button to proceed to the following page:

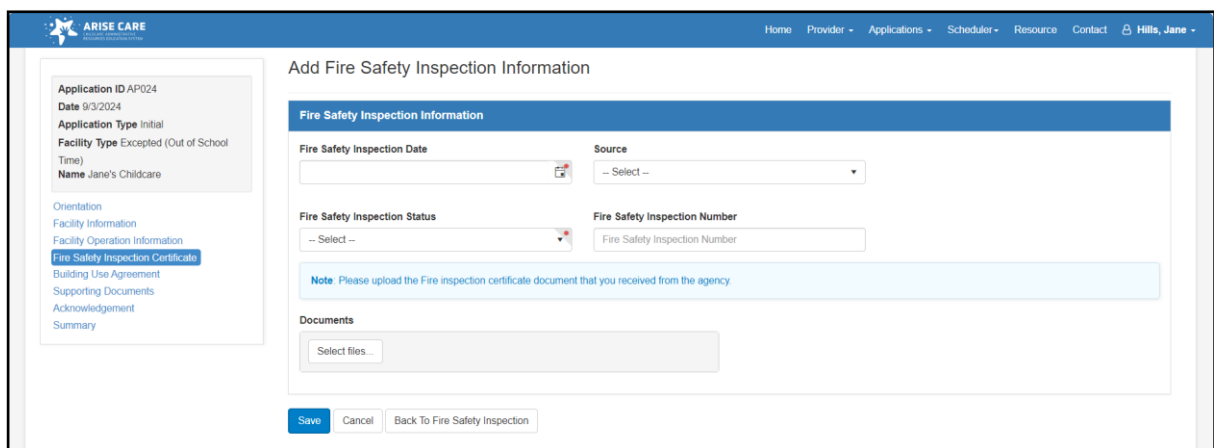
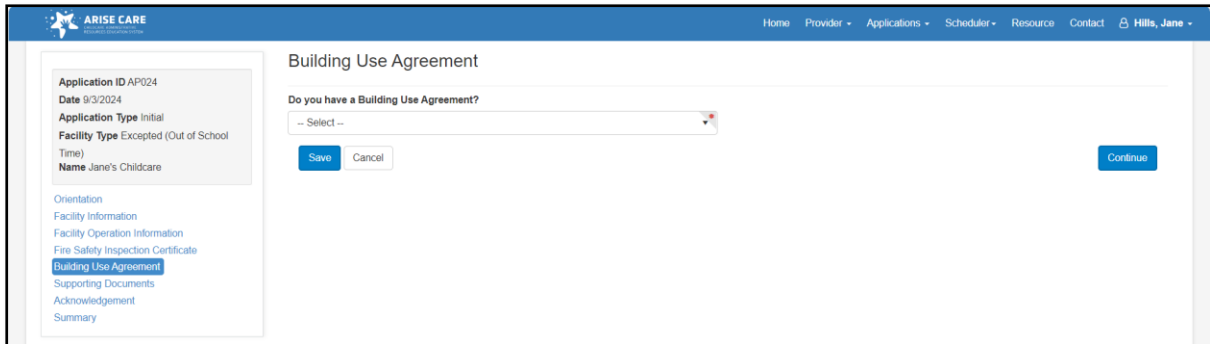


Figure 23: Add Fire Safety Inspection Information Page

On this page:

1. Enter all mandatory details.
2. Upload the relevant document.
3. Click on 'save' to save your information and proceed.
4. On clicking save, you will be taken back to the Fire Safety Inspection Certificate Page (Figure 22).
5. Click on the next section on the navigation pane on the left – Building Use Agreement, to be directed to the following page:



ARISE CARE
CHILD CARE ADMINISTRATIVE RESOURCES EDUCATION SYSTEM

Home Provider Applications Scheduler Resource Contact Hills, Jane

Building Use Agreement

Application ID AP024
Date 9/3/2024
Application Type Initial
Facility Type Excepted (Out of School Time)
Name Jane's Childcare

Orientation
Facility Information
Facility Operation Information
Fire Safety Inspection Certificate
Building Use Agreement
Supporting Documents
Acknowledgement
Summary

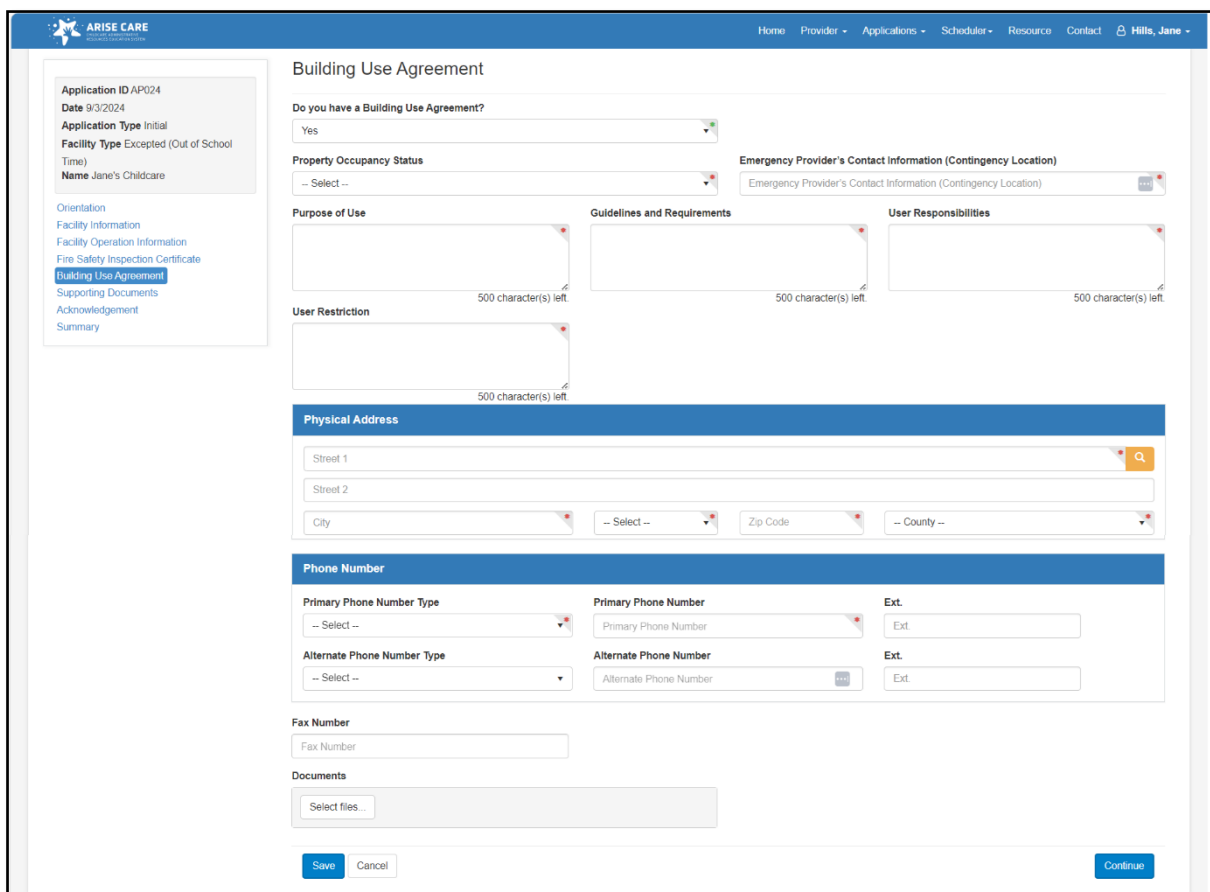
Do you have a Building Use Agreement?
-- Select --

Save Cancel Continue

Figure 24: Building Use Agreement Page

On this page, you will see a single drop-down menu, where you may choose either 'yes' or 'no' based on whether you would like to supply a Building Use Agreement Certificate.

In case, you choose 'Yes', the following form will appear:



ARISE CARE
CHILD CARE ADMINISTRATIVE RESOURCES EDUCATION SYSTEM

Home Provider Applications Scheduler Resource Contact Hills, Jane

Building Use Agreement

Application ID AP024
Date 9/3/2024
Application Type Initial
Facility Type Excepted (Out of School Time)
Name Jane's Childcare

Orientation
Facility Information
Facility Operation Information
Fire Safety Inspection Certificate
Building Use Agreement
Supporting Documents
Acknowledgement
Summary

Do you have a Building Use Agreement?
Yes

Property Occupancy Status
-- Select --

Emergency Provider's Contact Information (Contingency Location)
Emergency Provider's Contact Information (Contingency Location)

Purpose of Use
500 character(s) left

Guidelines and Requirements
500 character(s) left

User Responsibilities
500 character(s) left

User Restriction
500 character(s) left

Physical Address

Street 1
Street 2
City -- Select -- Zip Code -- County --

Phone Number

Primary Phone Number Type -- Select -- Primary Phone Number Ext. Ext.
Alternate Phone Number Type -- Select -- Alternate Phone Number Ext. Ext.

Fax Number
Fax Number

Documents
Select files...

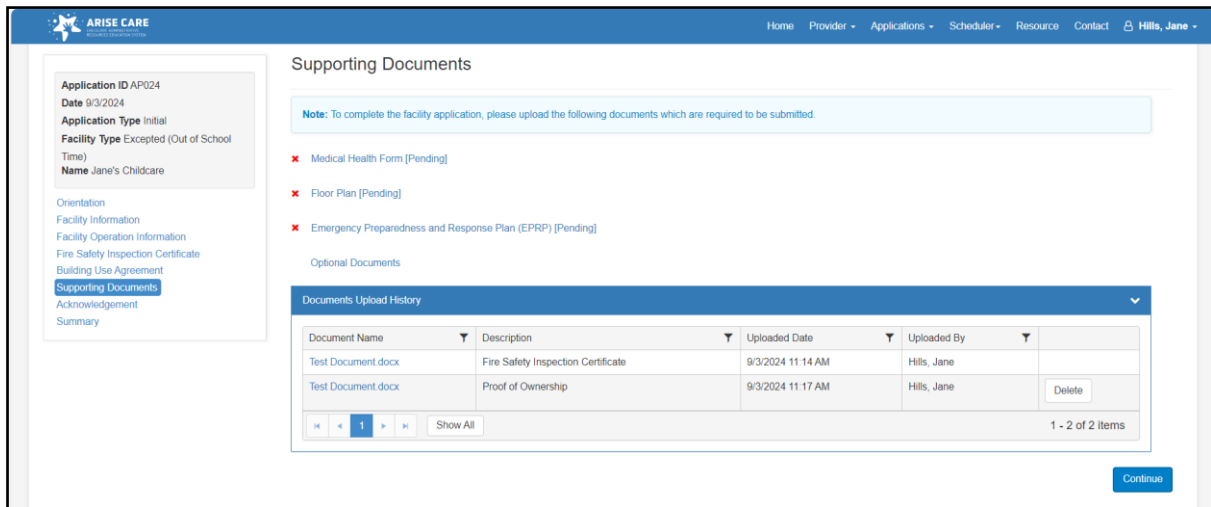
Save Cancel Continue

Figure 25: Adding Building Use Agreement Details

On this form:

1. Fill in all mandatory details.
2. Upload the relevant document.
3. Click on 'save' to save your progress.
4. To proceed to the next step, click on the next section on the left navigation pane – Supporting Documents.

Clicking on this link will lead you to the following page:



The screenshot shows the 'Supporting Documents' page. On the left is a navigation pane with links: Orientation, Facility Information, Facility Operation Information, Fire Safety Inspection Certificate, Building Use Agreement, **Supporting Documents**, Acknowledgement, and Summary. The main content area has a header 'Supporting Documents' and a note: 'To complete the facility application, please upload the following documents which are required to be submitted.' Below the note is a list of required documents: Medical Health Form [Pending], Floor Plan [Pending], and Emergency Preparedness and Response Plan (EPRP) [Pending]. There is also a section for 'Optional Documents'. Below that is a 'Documents Upload History' table with columns: Document Name, Description, Uploaded Date, and Uploaded By. The table contains two rows: 'Test Document.docx' with description 'Fire Safety Inspection Certificate' and 'Test Document.docx' with description 'Proof of Ownership'. At the bottom right of the table is a 'Delete' button. A 'Continue' button is at the bottom right of the page.

Figure 26: Supporting Documents Page

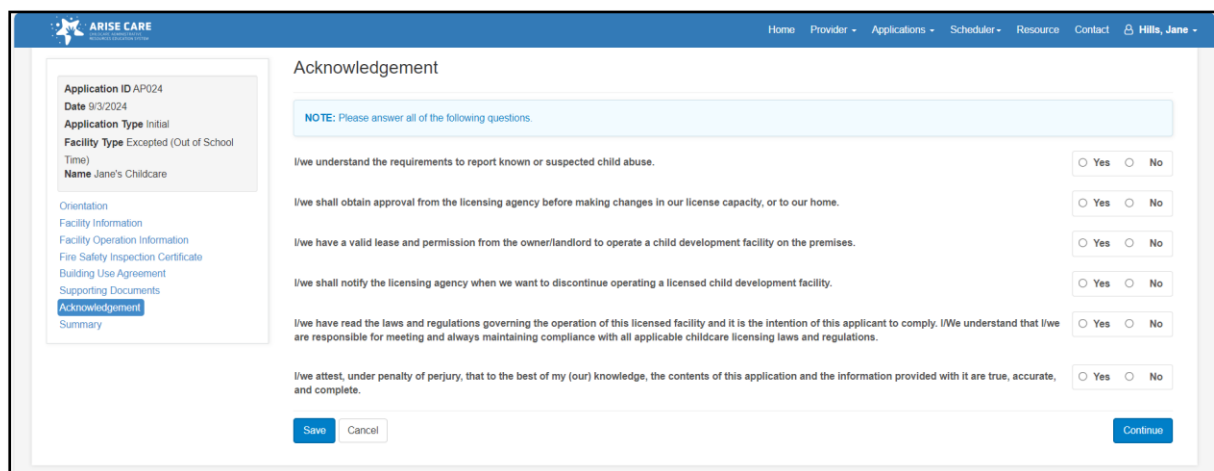
On this page, you will see a list of clickable items, all referring to the documents to be uploaded. Additionally, you will also see a grid including all documents that you have already uploaded during the application process thus far.

To complete this section:

1. Click on each link to select the files to upload.
2. Complete the list to see green tick marks appear next to every completed item.

Once all supporting documents have been uploaded, click on the next section on the navigation pane on the left – Acknowledgement.

Clicking on the link will lead to the following page:



The screenshot shows the 'Acknowledgement' page. On the left is the same navigation pane as in Figure 26, with 'Acknowledgement' now highlighted. The main content area has a header 'Acknowledgement' and a note: 'NOTE: Please answer all of the following questions.' Below the note are five questions, each with 'Yes' and 'No' radio button options:

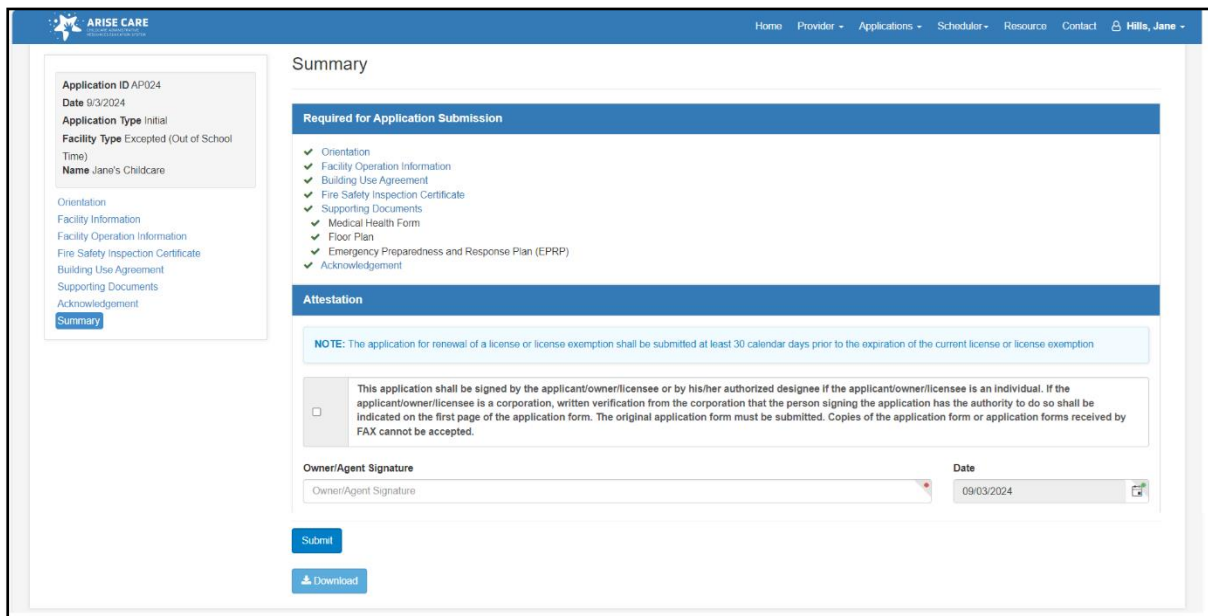
- I/we understand the requirements to report known or suspected child abuse.
- I/we shall obtain approval from the licensing agency before making changes in our license capacity, or to our home.
- I/we have a valid lease and permission from the owner/landlord to operate a child development facility on the premises.
- I/we shall notify the licensing agency when we want to discontinue operating a licensed child development facility.
- I/we have read the laws and regulations governing the operation of this licensed facility and it is the intention of this applicant to comply. I/we understand that I/we are responsible for meeting and always maintaining compliance with all applicable childcare licensing laws and regulations.

 At the bottom is a statement: 'I/we attest, under penalty of perjury, that to the best of my (our) knowledge, the contents of this application and the information provided with it are true, accurate, and complete.' Below this statement are 'Save' and 'Cancel' buttons on the left, and a 'Continue' button on the right.

Figure 27: Acknowledgement Page

1. Complete this section by answering the questions with 'Yes' or 'No' responses.
2. In case of a 'No' response, a description box will appear which will need to be mandatorily filled with an explanation of the response.
3. Once complete, click on the 'Save' button to save your progress.

4. Click on 'Summary' on the navigation pane to be redirected to the following screen:



The screenshot shows the 'Summary' page of the ARISE Provider Portal. The page has a blue header with the ARISE CARE logo and navigation links: Home, Provider, Applications, Scheduler, Resource, Contact, and a user profile for Hills, Jane. On the left is a navigation pane with links: Orientation, Facility Information, Facility Operation Information, Fire Safety Inspection Certificate, Building Use Agreement, Supporting Documents, Acknowledgement, and Summary (which is highlighted). The main content area is titled 'Summary' and contains two sections: 'Required for Application Submission' and 'Attestation'. The 'Required for Application Submission' section lists seven items, all with green checkmarks: Orientation, Facility Operation Information, Building Use Agreement, Fire Safety Inspection Certificate, Supporting Documents, Medical Health Form, Floor Plan, Emergency Preparedness and Response Plan (EPRP), and Acknowledgement. The 'Attestation' section includes a note about the 30-day submission deadline and a checkbox for the applicant/owner/licensee signature. Below this is a signature field for the Owner/Agent and a date field set to 09/03/2024. At the bottom are 'Submit' and 'Download' buttons.

Figure 28: Summary Page

Ideally, at this point, the summary list will be completed and will only depict green checks.

In case of any incomplete element, click on the respective link to fill in the missing information.

Once the entire list has been completed, you may proceed as follows:

1. Click on the acknowledgement checkbox to indicate your agreement.
2. Fill in your signature.
3. Ensure that the date is filled in correctly.
4. Finally, click on the 'submit' button to submit your completed application.
5. Following this, you may download your submitted application by clicking on the 'Download' button on the same page.

Congratulations! You have completed the second step and have submitted your License Exempt Application!