



BEST BEGINNINGS CHILD CARE SCHOLARSHIP

ATTACHMENT C

CHILD CARE SERVICE PLAN

INSTRUCTIONS

To choose a child care provider, the agency needs the information below to finalize the authorization plan. Your child must live with you for scholarship payment.

- Use a **separate** form for each child and child care provider.
- If you change providers, submit a new form before, or within one (1) business day to maintain a child care scholarship.

Next steps:

You and your provider will receive an authorization plan in the mail, which outlines the approved dates and hours for child care. *Payment will be made only after the child care authorization plan is complete.*

Note: This is not an application for a child care scholarship. This is not a contract. This information is used only to arrange for a child care scholarship. The parent and provider may contract for services in a separate agreement.

1. APPLICANT INFORMATION

APPLICANT NAME	PHONE #
----------------	---------

2. PROVIDER INFORMATION (Ask your provider to help you in completing this form)

A provider must have a current payment (PV) number.

PROVIDER'S NAME	PROVIDER'S LICENSE # PV#
PROVIDER'S ADDRESS	PROVIDER'S TELEPHONE #

Type of Child Care Setting/Facility:

- FFN**- Family, Friend, and Neighbor OR **RCE** – Relative Care Provider Exempt
 Parent Home or **Provider** Home

- Family** Child Care Home **Group** Child Care Home Child Care **Center**

FOR OFFICE USE ONLY	CS _____ CE _____		HoH Name		Date Received	
	Begin Date	End Date	Reason	Determination Date	Determined By	

3. CHILD SCHEDULE

Child's Name:	Provider's Name:	Start Date
---------------	------------------	------------

Is this child related to the provider? Yes No If yes, relationship

Is this the Child's Primary Provider Yes No If no, explain.

HOURS AND DAYS CHILD CARE IS NEEDED

To describe your child's need for child care,

- Use one or more weeks, and
- Hours of the day or total hours in a day.

Please note:

- Child care is limited to 50 hours per week per child.
- If your child has multiple child care providers, time must be split between the providers.
- Include any travel time you may need.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day

Please list any additional information that may be needed to create the child's Authorization Plan. For example, if the schedule varies.