



## FEE SUBSIDY APPLICATION

Enclosed is the Fee Subsidy Application. If you intend to apply for a fee subsidy, please complete the application and submit it with all required documents. If your Fee Subsidy application is not received with proper documentation prior to attending, you will be responsible for the full tuition amount and will be billed the full tuition rate for the first month of care.

Footstep Child Care, Inc. strives to make our high quality care services available to as many qualifying families as possible through our internal fee subsidy program. However, we have limited fee subsidy funds and cannot award a fee subsidy to a family if you currently carry a balance from a prior period.

### INCOME VERIFICATION & DOCUMENTATION

Please attach copies of most recent pay stubs. Pay stub should include name of employee, date of payroll check, amount of gross pay, and pay period covered by the check. Pay stubs must cover at minimum one consecutive month; additional months may be requested. If self-employed, please attach most recent estimated quarterly taxes and 1040 Schedule C (Business Income & Expense). Additional documentation such as tax returns may also be requested.

### ADDITIONAL CONSIDERATIONS DOCUMENTATION

Footsteps Child Care reviews additional circumstances on a case-by-case basis. Additional considerations include medical expenses, student loans, and college tuition payments. If these apply to you please provide the monthly cost and appropriate documentation.

### CHANGES IN SITUATION

If the financial position presented in your application changes for any reason you will have five (5) days to submit a new application. Footsteps Child Care reserves the right to revoke fee subsidies if you fail to follow this guideline.

All tuition payments are due by the 10<sup>th</sup> of the each month. You must keep your account current or risk losing your fee subsidy. Payments can be made via Tuition Express, check, or money order. Fee subsidies do not apply to all Footsteps Child Care services and are limited to a maximum of 50% for all summer camp programs.

If you have any questions, please contact the Admin Office, telephone - 650-610-0715 or email – [office@footstepschildcare.org](mailto:office@footstepschildcare.org).

# FOOTSTEPS CHILD CARE, INC.

## Fee Subsidy Application

Please complete only one form per Family. Must accompany Footsteps Enrollment Form

New Application  Recertification

School Year/Summer \_\_\_\_\_ Start Date \_\_\_\_\_ (New applications)



### Enrolling Child(ren) Information

Child 1 \_\_\_\_\_ Child 2 \_\_\_\_\_ Child 3 \_\_\_\_\_

Birth Date \_\_\_\_\_ Birth Date \_\_\_\_\_ Birth Date \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Reason for requesting child care \_\_\_\_\_

Total Family/Household Size \_\_\_\_\_ Parents/Guardians \_\_\_\_\_ Children \_\_\_\_\_ Other Adults \_\_\_\_\_

### Program (Mark all that apply)

**School Age**  Cipriani  Nesbit  Redwood Shores  Barrett  Ralston

**Preschool**  Cipriani Preschool  Puma Cubs  City Center Plaza

**Summer**  Footsteps Programs  City of Belmont Partnership Programs (Barrett)

### Parents/Guardians

**Guardian 1** First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Guardian 1 Employer \_\_\_\_\_

Full Time?  Yes  No Hours Per Week (If part time) \_\_\_\_\_ Hourly Wage/Monthly Salary \_\_\_\_\_

Guardian 1 Unemployed *Fee subsidy is granted for 3 months while a parent/guardian looks for employment*

**Guardian 2** First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Guardian 2 Employer \_\_\_\_\_

Full Time?  Yes  No Hours Per Week (If part time) \_\_\_\_\_ Hourly Wage/Monthly Salary \_\_\_\_\_

Guardian 2 Unemployed  Guardian 2 is not financially responsible for child

Please attach copies of most recent pay stubs. Pay stub should include: name of employee, date of payroll check, amount of gross pay, and pay period covered by the check. Pay stubs must cover at minimum one consecutive month, additional months may be requested. If self-employed, please attach most recent estimated quarterly taxes and 1040 Schedule C (Business Income & Expense). Additional documentation such as tax returns may be requested.

### Other Income

Social Security \$ \_\_\_\_\_  Disability \$ \_\_\_\_\_  Unemployment \$ \_\_\_\_\_  CalWorks \$ \_\_\_\_\_

Child Support/Alimony \$ \_\_\_\_\_  Other \_\_\_\_\_ \$ \_\_\_\_\_

### Non-Enrolled Children & Other Household Members

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Claimed as Dependent?  Yes  No

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Claimed as Dependent?  Yes  No

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Claimed as Dependent?  Yes  No

### Additional Considerations

Medical Expenses \_\_\_\_\_  Student Loans \_\_\_\_\_

College/School Tuition \_\_\_\_\_ Student Name \_\_\_\_\_ School Name \_\_\_\_\_

Please list monthly costs. Statements or invoices are required to verify.

Homeless within 24 months  Enrolled in a substance abuse treatment program

*Additional considerations will be evaluated on a case by case basis*

**FOOTSTEPS CHILD CARE, INC.  
FRAUD POLICY FOR PARENTS OR GUARDIANS**

- Submitting false or misleading information to Footsteps Child Care, Inc. can and will be grounds for termination of all programs services.
- The California Department of Education requires us to inform families receiving child care funding that if funds are obtained by providing fraudulent or incomplete information, or by purposefully omitting information, Footsteps Child Care, Inc. shall pursue collection actions against the parent(s), guardian(s), and/or other person(s) who committed the fraudulent act in order to recover funds paid for child care services.
- This action is in accordance with the Fraud Policy issued by the California Department of Education, Child Development Division.

**ANY OF THE FOLLOWING COULD CONSTITUTE FRAUD**

*Please initial after each statement*

\_\_\_\_\_ Submitting fraudulent or misleading documentation or knowingly failing to supply documentation including, but not limited to: income, training programs, school, medical incapacitation, employment, marital status, family size, second parent living in the household, and/or place of residency.

\_\_\_\_\_ Failure to report loss or change of employment within five (5) days due to termination, temporary layoff, and/or medical leave.

\_\_\_\_\_ Failure to report your child’s actual attendance on the daily sign-in sheets.

\_\_\_\_\_ Failure to report receiving funds for childcare services from another agency.

Footsteps Child Care, Inc. will first attempt to recover funds directly from the parent(s) or guardian(s); if the parent(s) or guardian(s) do not comply, Footsteps Child Care, Inc. will take further recovery actions according to our written policies.

My signature below indicates I have read and understand Footsteps Child Care, Inc.’s Fraud Policy

Parent/Guardian 1 Printed Name	Parent/Guardian 1 Signature	Date
Parent/Guardian 2 Printed Name	Parent/Guardian 2 Signature	Date