



Child Care Reimbursement Request Form

The program reimbursement is for child care used while attending classes only and is reimbursed at the rate of \$1.75 per hour up to 12 hours per week per child with a monthly \$125 maximum. Reimbursement is based on funding availability.

Month: _____ Year: _____

Participant's Name _____

Name of Child Care Provider _____

Provider Address _____ City _____ Zip _____

Provider Phone Number _____

Check one: Licensed Group _____ Licensed Family _____ Certified _____ Unlicensed _____ Other _____

Child's Name	Child's Age
1.	
2.	
3.	

Cost below is based on per (pick one): Hour _____ Day _____ Week _____
Cost per child is: 1st child \$ _____ 2nd child \$ _____ 3rd child \$ _____

In the boxes below please indicate the date the child(ren) received care, how much was paid for each child(ren) as well as the total paid to the provider.

Date	Total Hours			Total Charges	Date	Total Hours			Total Charges
	1 st child	2 nd child	3 rd child			1 st child	2 nd child	3 rd child	
1					17				
2					18				
3					19				
4					20				
5					21				
6					22				
7					23				
8					24				
9					25				
10					26				
11					27				
12					28				
13					29				
14					30				
15					31				
16					Total Charges for Entire Month →→→				



Signatures verify that the information on page 1 is true, correct and the provider has been or will be paid for the services provided. Falsification of information may result in termination from the program and legal action.

Participant's Signature _____ Date _____

Childcare Provider's Signature _____ Date _____

Authorized By (Couleecap Staff) _____ Date _____

STAFF USE ONLY:

_____ Hours (up to 12 a week) x _____ number of weeks = _____ total number of hours

_____ Total number of hours x \$1.75/hour = _____ Cost per child

_____ Cost per child x _____ number of children = _____ total reimbursed
*Maximum monthly reimbursement = \$125

Amount Authorized \$ _____ Code _____

Amount Authorized \$ _____ Code _____

Amount Authorized \$ _____ Code _____

Total Authorized: \$ _____