

Chatham

Childcare

Voucher Program

A childcare financial assistance fund for eligible residents and employees of Chatham businesses, intended to help local, working families in need of financial assistance with their childcare expenses.

This community resource offers temporary, short-term assistance with child care costs for qualifying families, **especially those families experiencing unexpected or extraordinary situations** that are impacting their ability to pay for their MA licensed childcare arrangements.

Individuals interested in accessing an award are required to complete an application and to provide income documentation.

- Open to eligible Chatham residents or those employed by or owning Chatham businesses.
- Awards vary upon need and availability of funds.
- Applications are accepted on a rolling basis.
- Awards may be used only with MA licensed childcare providers

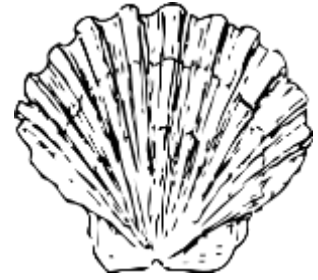
Application packets for 2017-18 funds will be available September 1st at www.monomoy.org, www.chatham-ma.gov or by contacting the Monomoy office (508)945-1501. Completed application packets will be accepted, beginning September 15, 2017.

Need more Info?

Contact Monomoy Community Services 508-945-1501.

****The program is managed by Monomoy Community Services and is made available through the Chatham Human Services Advisory Committee and the Town of Chatham.****

FAQ Sheet



What does this program offer?

Helps **local working families** meet the expenses associated with childcare by offering temporary, short-term assistance with child care costs, ***specifically those families experiencing unexpected or extraordinary situations*** that are impacting their ability to pay for their MA licensed childcare arrangements. The program is managed by Monomoy Community Services for the Town of Chatham.

Who is eligible to apply?

Local working families with children ages Birth – 13 years are eligible to apply, with priority given to any family whose legal, year-round residence is the Town of Chatham and/or who owns or is employed by a Chatham business. Eligibility for this scholarship is not based on income; however income and employment verification are required.

How does the program work?

- Awards are made on a rolling basis.
- Families interested in applying for assistance complete an application form and submit it with the appropriate income verification.
- Completed applications from eligible applicants are reviewed, receive a needs score and an award notification is sent to the applicant.
- Applicant gives required registration paperwork to his/her childcare provider.
- Childcare provider submits payment request to Monomoy Community Services.
- Childcare provider receives payment.
- One time awards range from \$100-\$750 per child.

How to apply...

Secure a copy of the application via www.monomoy.org or www.chatham-ma.gov or by contacting the Monomoy Community Services office. Mail or return the completed application with the required income verification to:

Monomoy Community Services
166 Depot Road
Chatham, MA 02633

No awards will be made to partial or incomplete applications.

For assistance with your application form, please contact 508-945-1501.

Chatham Childcare Voucher Application

Please complete the scholarship information sections.

Name(s) & Age(s) of children ages Birth- 13yrs in household for whom you are requesting assistance:

Name(s) of Legal Parent/Guardians in household:

Parent/Guardian #1 _____

Legal Address: _____

Parent/Guardian #1 _____

Legal Address: _____

Mailing Address: (If different from above)

Evening phone _____ email _____

Please list name of any other person 18+ years of age living in the household.	Relationship to child(ren)

_____ Please check if single parent household.

_____ Please check here if financial responsibility for child(ren) is shared with someone not currently residing in the household.

Please list any other children living in the household and their ages:

_____ Please indicate the total gross monthly income* for the entire household for the last month (Gross pay is the amount you make before taxes, and withholdings are taken out). This figure should include all income for the household.

_____ Please indicate your anticipated gross monthly income for next month.

IMPORTANT: Please attach the correct income verification for your current employment situation as indicated on the income verification sheet.

Place(s) of employment for each parent/guardian: Information supplied here may be verified.

Name and Address of Business/Employer	Business Phone	# Hours weekly	Days and hours of work schedule. (i.e. M-W-F 9-5) If this varies or changes often, provide typical schedule

If currently unemployed:

Date unemployment began dd/mm/yy	Check here if <u>seasonally</u> employed. List dates when seasonal employment usually begins and ends.

Please check if **currently attending college or employment training**

_____parent 1 attending school/training _____parent 2 attending school/training

If attending school/training, please indicate name of institution, program, #credit hours enrolled & hours of attendance. (Please note: your enrollment may be verified)

Please list any state, federal or local financial aid, grants or support you presently receive (i.e. AFDC, housing assistance, fuel assistance, DSS voucher.)

Type of support

Monthly \$ amount

Please check each financial resource listed below with whom you have applied for financial assistance, during this calendar year and the date your application was submitted and any awards you have received.

****All applicants are required to disclose any other funding awards they have received and failing to do so may jeopardize your chances to receive this funding.**

Check if you have applied	Name of Award The agency or funding source providing your financial assistance	When did you apply?	Amount of Award and when received?
	MA EEC Childcare Voucher (from Childcare Network of Cape Cod-Hyannis)		
	Shaw Mariners' Fund		
	Cape Cod Children's Place Emergency Childcare Award		
	St Vincent DePaul		
	Cape Cod Needy Fund		
	Town of Chatham Summer Rec or PARK Childcare Program		
	<u>Other</u>		

Childcare Provider Information

Please complete this section to provide information regarding your childcare provider.

Provider's Name	Provider Mailing Address, Phone and email	MA Childcare License #

Indicate days and time each day that your child attends for each provider. List each child's providers separately.

Provider	Usage	Mon Hours	Tues hours	Wed hours	Thurs hours	Fri hours	# hours Weekly Total
	Check one: <input type="checkbox"/> year round use <input type="checkbox"/> school year only <input style="color: red;" type="checkbox"/> <u>summer only</u>						
	Check one: <input type="checkbox"/> year round use <input type="checkbox"/> school year only <input type="checkbox"/> summer only						
	Check one: <input type="checkbox"/> year round use <input type="checkbox"/> school year only <input type="checkbox"/> summer only						

_____ **Total Monthly Hours of Care (Average)** _____ **Total Monthly Care expense** (if you are not sure, ask your childcare provider to assist you in determining this number.)

Please list any additional monthly childcare expenses: _____

_____ Please check here if you receive a reduced tuition from your childcare provider or school.

Family Narrative

If you feel there are circumstances or details about your family and/or current living situation that are not represented adequately in the application form, please use this space to include anything you would like brought to the attention of the review committee. Please feel free to add as much information as you care to include. Your application will be kept in strict confidence and will be made available only to the review committee, without specific reference to your name.

If you would like assistance completing the application or would like the opportunity to complete an interview for the narrative section, rather than a written explanation, please contact Monomoy Community Services, Inc. (508-945-1501).

The information included in this application is truthful and accurate to the best of my knowledge. I understand that any falsification of information or discrepancies may jeopardize award eligibility.

Signed _____ Date _____

Submit completed application with required income verification to:

Monomoy Community Services
166 Depot Rd
Chatham, MA 02633

Forms needed for Income Verification

The Chatham Childcare Voucher Program is intended to provide temporary, short-term assistance with child care costs *especially those families experiencing unexpected or extraordinary situations* that are impacting their ability to pay for their MA licensed childcare arrangements. While there is no cut-off for income eligibility, income is one of the factors considered in the application review process and accurate income documentation and verification are required.

If you are employed by someone other than yourself you must submit:

1. Copies of your paystubs (do not submit originals) that document the last 8 weeks of pay information including, your name, gross pay, net pay and number of hours worked. The paystub information *must show consecutive weeks*.

OR

2. A letter from your employer on company letterhead that includes
Your monthly gross for the last three months.
The hours per week you work for the last three months
When (hours per day, eves, weekends,) you worked during those three months.

* If your employer does not have letterhead, he/she must have his/her verification letter notarized.

If you are self-employed you must submit both:

1. **A statement of income declaration. This is a notarized statement detailing your gross pay, income sources and hours worked for the past 8 consecutive weeks. We reserve the right to verify any income source you list as a pay source.**
2. **A copy of your most recent submitted, year-end tax filing.**

If you are unemployed and collecting you must submit :

1. A copy of your current unemployment benefits forms.

If you are unemployed and not or no longer collecting you must submit

1. **A statement of income declaration. This is a notarized statement explaining that you are currently unemployed, how long you have been unemployed, a summary of your monthly expenses and a brief explanation of how you are managing expenses (example: using savings, assistance from family, etc.).**