

# **NORTH CENTRAL TEXAS COLLEGE**

# **NETWORKS**

## **Childcare Application**

### **Program Services:**

- Childcare Assistance
- Career Assessment
- Community Referrals
- Enrichment Seminars

**Questions? Contact Yvonne Sandmann**

**940-668-3300**

**Gainesville Campus Room 111**

**[ysandmann@nctc.edu](mailto:ysandmann@nctc.edu)**

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**NORTH CENTRAL TEXAS COLLEGE**  
**Perkins NETWORKS PROGRAM**  
**CHILD CARE SUPPLEMENTAL ASSISTANCE**

***ELIGIBILITY REQUIREMENTS FOR CHILD CARE ASSISTANCE:***

- I. **You must be declared as a Technical Student or a non-traditional career Student.** You will be required to attach a degree audit showing the major you chose with the classes registered.
  
- II. **You must establish financial need.** One way to do this is to apply and qualify for the Federal Aid PELL Grant. To apply, contact North Central Texas College Financial Aid Office by calling (940) 668-4242 on the Gainesville Campus and/or (940) 497-8002 on the Corinth Campus. You may also establish financial need by qualifying to receive food stamps. To do this contact the Texas Department of Human Services at (940) 665- 9315 for Cooke County Residents or (800) 448-3927 for Denton County Residents.
  
- III. **You must complete a Childcare Assistance Application for the Networks project and provide all requested documentation.**

***THE FOLLOWING DOCUMENTATION IS REQUIRED TO PROCESS YOUR CHILD CARE APPLICATION PACKET:***

1. A completed Childcare Application form.  
**\*\*Note:** Forms must have all blanks completed and all required documentation attached.
2. A completed Childcare Provider form.  
**\*\*Note:** Your Childcare Provider must be a licensed day care center or a registered family home.  
**A list of registered day cares can be found at the following web site: [www.dfps.state.tx.us](http://www.dfps.state.tx.us)**
3. Copy of the approval letter for the Federal Financial Aid Pell Grant or written verification of food stamps assistance.
4. **A Degree Plan printed from the Admissions office declaring your major.**
5. A copy of your class schedule. This will provide proof you are enrolled.
6. Copy of check stubs or of your tax form to verify financial need.
7. Networks Child Care Assistance Award Contract, signed and dated.
8. Copies of birth certificates for each child you are declaring under the child care reimbursement program.
9. If sponsored by the Workforce Investment Act (W.I.A.) through the Texas Workforce Centers, include a letter from W.I.A. verifying that you are a W.I.A. client.

**If any of the above information is missing when you submit your application, your application will be placed on hold and will not go through the review process.**

## ***REQUIREMENTS FOR CONTINUED CHILDCARE SUPPLEMENTAL ASSISTANCE:***

- 1) You must meet with an OSD Office Counselor to complete the intake process prior to the application being considered complete. No assistance can be approved until this step is completed.
- 2) You must submit attendance verification forms monthly. The dates the forms are due are specified in the award letter you receive before assistance begins.
- 3) You must submit proof that you paid your childcare provider. A form for your provider to complete is included in the award letter.
- 4) You must maintain at least a 2.0 overall grade point average.
- 5) You **MUST RE-APPLY EACH SEMESTER** by completing a new Networks application.
- 6) Continued assistance is contingent upon receipt of federal funds and your adherence to the above policies.

## ***CHILDCARE ASSISTANCE INFORMATION:***

- Applications are reviewed for eligibility by the dates they are received in the OSD office. Please note that we may not have sufficient funds to assist everyone who applies, so early completion of the forms and submission of documentation is advised.
- NCTC does not provide childcare services on its campuses. You will choose your own childcare provider from state-licensed day care centers or a registered family home. **A list of registered day cares can be found at the following web site: [www.dfps.state.tx.us](http://www.dfps.state.tx.us).**
- Any changes in the placement of your children in a specified childcare program must be reported to the OSD Office Counselor. For example, if you remove your children from childcare, move them to a different program, change the number of days that your children attend child care, or add children to your childcare, you must report this information.
- Participants are responsible for any childcare costs not covered by the NCTC Networks Program.
- Final determination of the award amount is not possible until after registration as the award amount is based on the amount you pay your childcare provider. If awarded assistance, you will be notified by mail after registration is complete. Typical amount will be between 50%-70% of estimated daycare expense. We do not cover registration fees or activity fees.
- The actual amount of assistance granted and number of grantees is contingent upon the funding available.
- You must reapply each semester for childcare assistance.
- Participants will be asked to complete an end-of-semester evaluation of the Networks Program.
- **No childcare will be awarded if the student is only taking ONLINE courses unless approved by Yvonne Sandmann- Networks Specialist.**

NORTH CENTRAL TEXAS COLLEGE  
NETWORKS PROGRAM  
CHILDCARE SUPPLEMENTAL ASSISTANCE APPLICATION

Fill in each blank. Please print legibly.

**STUDENT INFORMATION:**

Student: \_\_\_\_\_ Social Security# \_\_\_\_\_  
(Last Name) (First Name) (MI)

Email address: \_\_\_\_\_ Student ID# \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_  
(Street/Box) (City) (Zipcode)

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Semester: \_\_\_\_\_ Year: \_\_\_\_\_ Major: \_\_\_\_\_ # of Hours : \_\_\_\_\_

New Student?: \_\_\_\_\_ Returning Student?: \_\_\_\_\_

Have you received childcare funding from this program in the past? \_\_\_\_\_ When? \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_

**HOUSEHOLD INCOME INFORMATION:**

Please check any of the following you are receiving:

Pell Grant _____	W.I.A. _____	Food Stamps _____
TANF _____	Loans _____	Child Support _____
Vet. Benefits _____	Social Sec. _____	Rent Assist. _____

Please check any of the following that apply:

- \_\_\_\_\_ I have applied for CCS (Texas Workforce Child Care Services).
- \_\_\_\_\_ I am on the CCS waiting list/not currently funded.
- \_\_\_\_\_ I have been approved and will begin CCS funding on \_\_\_\_\_
- \_\_\_\_\_ I am currently receiving CCS childcare funds.

**\* Note: If you are approved for CCS, please notify NCTC. You can not receive both.**

Number of family members in household: \_\_\_\_\_ Number of children in childcare: \_\_\_\_\_

Please provide the ages of all children in childcare: \_\_\_\_\_

Total Household Gross Monthly Income: \_\_\_\_\_  
(Please attach proof, i.e. check stubs or tax form)



NORTH CENTRAL TEXAS COLLEGE  
NETWORKS PROGRAM  
CHILDCARE PROVIDER VERIFICATION FORM

**FORM TO BE COMPLETED BY OWNER/DIRECTOR/MANAGER OF DAY CARE FACILITY:**

**INSTRUCTIONS:** Fill in each blank. Print legibly or type.

**Student/Parent** \_\_\_\_\_  
**NAME:**                      **(LAST)**                      **(FIRST)**                      **(MIDDLE)**

**CHILD CARE INFORMATION:**

**NAMES AND AGES OF STUDENT'S CHILDREN IN DAY CARE:**

1.        \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_
2.        \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_
3.        \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_
4.        \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_
5.        \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_

**Days of week child(ren) will be attending day care while student is in class:**

\_\_\_\_\_ **Monday**    \_\_\_\_\_ **Tuesday**    \_\_\_\_\_ **Wednesday**    \_\_\_\_\_ **Thursday**    \_\_\_\_\_ **Friday**

**LICENSED DAY CARE CENTER/ REGISTERED FAMILY HOME:**

**(NAME)** \_\_\_\_\_ **(Tax I.D.#)** \_\_\_\_\_

**(Address)** \_\_\_\_\_

**(City)** \_\_\_\_\_ **(Zip)** \_\_\_\_\_ **(Telephone)** \_\_\_\_\_

**LIST AMOUNT AND PAYMENT METHOD USED FOR CARE OF THE ABOVE CHILDREN:**

\$ \_\_\_\_\_ **Per Day**      \$ \_\_\_\_\_ **Per Week**      \$ \_\_\_\_\_ **Per Month**

The information is true and correct to the best of my knowledge.

**SIGNATURE:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Return to:**        **Yvonne Sandmann**                      **or**        **Wayne Smith**  
                         **OSD Advisor/Networks Program**                      **OSD Department Coordinator**  
                         **North Central Texas College**                                      **North Central Texas College**  
                         **1525 W. California St. Room 111**                                      **1500 N. Corinth Street, Room170**  
                         **Gainesville, TX 76240**    **Corinth, TX 76208-5408**  
                         **940-668-3300**    **940- 498-6207**

North Central Texas College does not discriminate on the basis of sex, race, color, national origin, gender, age, or disability in the employment or the provision of services.

**NORTH CENTRAL TEXAS COLLEGE  
NETWORKS PROGRAM  
CHILDCARE REIMBURSEMENT AWARD CONTRACT**

I certify that I am eligible to receive assistance from the **Networks Childcare Reimbursement Program**. I am enrolled in a technical program and/or non-traditional area of study. I agree to be responsible for completing each of the following tasks.

- A. Complete application for childcare assistance, providing all required information and documentation.
- B. Participate in an individual meeting with the OSD Office Coordinator to review the childcare assistance program requirements.
- C. Notify the OSD Office Coordinator of any changes concerning the placement of children in childcare, withdrawal of children from care, withdrawal from classes, extended absence from classes, or change of address and/or phone number.
- D. Actively keep apprised of payment of expenses to my Childcare Provider, and turn in the required form for childcare expenditures to the OSD Office Coordinator.
- E. Attend classes and submit the Attendance Verification Forms by the dates indicated on the Award Letter. Late submission of forms could delay reimbursement of funds.

I understand that it is my responsibility to submit a signed form completed by the Child Care Provider showing proof of payment before I can receive supplemental reimbursement of childcare expenses. I understand that I also must provide the Attendance Verification Forms signed by my instructors each month.

**I understand that payments will be discontinued if I do not comply with the guidelines, have poor attendance, or withdraw from classes.**

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Student Signature

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Date

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Network Representative

**NORTH CENTRAL TEXAS COLLEGE  
NETWORKS PROGRAM  
STUDENT CHECKLIST**

It is very important that you enclose the following items in your packet before mailing it to us. Remember we cannot grant your award if your packet is incomplete. If you have questions about how to complete your application packet, please call or come by the OSD Office for assistance.

**This is your checklist. Please check off items when completed.**

**THIS PACKET SHOULD INCLUDE:**

\_\_\_\_\_ 1) Your Financial Aid (Pell Grant) Award Letter (A copy is acceptable).

OR

\_\_\_\_\_ 2) Documentation of eligibility for food stamps (If applicable).

\_\_\_\_\_ 3) Completed Childcare Assistance application  
(Included in the application packet).

\_\_\_\_\_ 4) Completed Childcare Facility Verification Form  
(Included in the application packet).

**\*\*Note: Your childcare provider must be registered or licensed by the state. If you are using more than one childcare provider, you must complete a form for each one for which you are requesting funds.**

\_\_\_\_\_ 5) An official copy of your Degree Audit. (This can be obtained in Admissions Office)

\_\_\_\_\_ 6) Copy of your class schedule to verify you are enrolled

\_\_\_\_\_ 7) Copy of the birth certificates of your children who will be placed in  
Childcare.

\_\_\_\_\_ 8) Childcare Assistance Award Contract (signed and dated).  
(Included in the application packet).

\_\_\_\_\_ 9) A copy of check stub(s) or tax forms to verify financial need.

**PLEASE RETURN COMPLETED PACKET TO:**

**Gainesville, Bowie Graham Campuses:**

Yvonne Sandmann  
OSD Advisor/Networks Program  
North Central Texas College  
1525 W. California, Room ASC 111  
Gainesville, TX 76240  
(940) 668-3300

**Corinth & Flower Mound Campus:**

Wayne Smith  
OSD Department Coordinator  
North Central Texas College  
1500 N. Corinth Street, Room 170  
Corinth, TX 76208-5408  
(940) 498-6207