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Child Care Scholarship Tip Sheet

Need Help Paying for Child Care for a Child Birth – Age 5? We Can Help!

Our Child Care Scholarship Program Helps Pay For

High-Quality Child Care

So You Can Work or Go to School

What Is the Child Care Scholarship Program?

- The Child Care Scholarship program helps eligible parents/guardians pay for **high-quality child care** so that they can **work or go to school.**
- Serves eligible children **birth – age 5.** (Five-year-olds age out of the program once they enter kindergarten.)
- Operates **year-round.**

- Covers **full-time** child care, up to **50 hours** per week.

- If a family has **countable income**, there is a monthly parent fee of 10% of the family's monthly gross income before taxes. The family has the **same** parent fee **no matter how many siblings** are enrolled in the program.

- The Child Care Scholarship Program partners with **high-quality** 4 and 5-star child care facilities in **Davidson county.**

- All **4 and 5-star child care facilities** approved to work with the **Child Care Scholarship Program** use a **state-approved curriculum** featuring **hands-on, interactive, play-based instruction.** Studies show that young children learn best through **active, stimulating, interactive play.** Teachers set up the classroom so that it is **engaging** to the children. Then, teachers base their interactions with the children on the children's play activities to **extend and increase** the children's learning. **For example,** think back to classes you may have taken in school that were based on lectures and worksheets and how easy it was to "tune out" vs. classes you took that were **hands-on, interactive, and held your attention** so that you ended up learning more**. It's the SAME for young children.** Play-based instruction is hands-on, interactive, and **easier for young children to relate to** so that in the end, their **overall learning increases.** Participating in the **Child Care Scholarship Program** is an **excellent way** to prepare your child for **kindergarten.**

Scholarship Program Eligibility Requirements…

1. Applicant children must be **birth – age 5**, before they enter kindergarten.

2. Applicant families must live, work, or attend school in **Davidson County.**

3. **At the time that they APPLY FOR the program, ALL** parents / step-parents by marriage / guardians living in the household with the applicant child **must** be working an average of at least 20 hours per week; **OR** be enrolled in high school, college, or vocational school full time per school policy; **OR** have a combination of work and school in place that meets program eligibility requirements.

(Scholarship Program Eligibility Requirements Continued Next Page)

4. Families must be **at or below** the North Carolina Division of Child Development and Early Education's income guidelines for their family size. Please see below.

Family Size	1	2	3	4	5	6	7	8	9	10	11	12
Maximum Monthly Gross Income	$2,608	$3,525	$4,442	$5,358	$6,275	$7,192	$8,108	$9,025	$9,927	$10,858	$11,775	$12,692

5. Once approved for a Child Care Scholarship, families must enroll their child in **a 4 or 5-star child care facility in Davidson county** that is approved to work with the **SSDC Child Care Scholarship Program**. Please contact the **Child Care Resource Center** for a list of these centers at **336-245-4900** or see their websites at **www.findchildcarenc.org** or **https://childcareresourcecenter.org**

How to apply for services…

1. Please see our website at **www.partnershipforchildren.org > For Families Tab > Childcare Scholarship Tab > #3 Child Care Scholarship—Program Application** to print a copy of the application.

2. Please see the checklist on page 1 of the Scholarship application for a list of required supporting documentation. Please gather the supporting documentation **that applies to your family.**

   If you are receiving income OR are currently enrolled in school, please submit all documentation below that reflects your situation.

   - **Do you receive PAYSTUBS from an employer?**

     If you receive **paystubs** from an employer, please see the guidelines below to make sure that your paystubs are complete and ready for processing.

     Please submit your…

     _____ 8 most recent, consecutive paystubs (if you are paid weekly);

     _____ 4 most recent, consecutive paystubs (if you are paid bi-weekly or twice a month);

     _____ 2 most recent, consecutive paystubs (if you are paid monthly)

(Paystub Guidelines Continued Next Page)

Paystubs must include ALL information below for us to use them for processing…

1. Parent Name
2. Company/Employer Name
3. Pay Date
4. Gross pay before taxes
5. Total hours worked

- **Do you have a NEW JOB or is your COMPLETE SET of paystubs UNAVAILABLE?**

(A complete set of paystubs = 8 most recent, if paid weekly----4 most recent, if paid biweekly or twice a month----2 most recent, if paid monthly.)

If you have a **new job** or if you don't have access to a **complete set** of paystubs, please print a copy of our **Employment Verification Form** at **www.partnershipforchildren.org > For Families Tab > Childcare Scholarship Tab > #5 Employment Verification Form**

1. Your **employer** must complete the **Employment Verification Form** for us to use it for processing.
2. Please submit any paystubs that you have received **so far** from your new job.

- **Did you receive any BONUSES on the paystubs that you are about to submit?**

Please review the pay stubs that you are **about to submit.** If you received any **bonuses on these particular** paystubs, please ask your **employer** to complete the Bonus Form. We use the information on this form to avoid overinflating your income. If this applies to you, please print a copy of the **Frequency-of-Employment-Bonuses-Received Form** at **www.partnershipforchildren.org > For Families Tab > Childcare Scholarship Tab > #4 Frequency-of-Employment-Bonuses-Received Form**

- **Will you be returning to work soon from MEDICAL OR MATERNITY LEAVE?**

If you will be returning to work soon from **medical or maternity leave**, please print a copy of our **Medical/Maternity Leave--Return-to-Work Form—New Applicants** at **www.partnershipforchildren.org > For Families Tab > Childcare Scholarship Tab > #6 Medical/Maternity Leave--Return-to-Work Form—New Applicants**

1. Please ask your **employer** to fill out the "Medical/Maternity Leave—Return-to-Work Form—New Applicants" to document your income and return-to-work date.

- **Are you SELF-EMPLOYED at your own business, a 1099 employee, or does your employer not deduct taxes from your income?**

If you are **self-employed** at your own business, are a 1099 employee, or your employer does not deduct taxes from your income, please print a copy of our **Self-Employment Packet** at **www.partnershipforchildren.org > For Families Tab > Childcare Scholarship Tab > #7 Self-Employment Packet** and contact SSDC Child Care Scholarship staff for more information about how to fill out the form. Self-employed applicants **must** be working an average of at least 20 hours per week earning at least the North Carolina minimum wage of $7.25 per hour.

- **Are you a STUDENT?**

1. If you are working an average of **at least 20 hours per week**, we do **NOT** need your student documentation.

2. **HOWEVER,** if you are **UNEMPLOYED** or working **FEWER THAN** an average of 20 hours per week, please turn in a copy of your **school schedule (or a letter from the Student Records Office or the Office of the Registrar for schools that do not provide school schedules).**

(Student Documentation Guidelines Continued Next Page)

Student documentation must include ALL information below for us to use it for processing…

1. Parent Name
2. School Name
3. Semester / School Term
4. # Credit Hours or Full-time/Part-time Status
5. Recent Date

- **Do you receive CHILD SUPPORT for ANY/ALL children who live with the applicant child?**

Child support is **countable** for **ANY/ALL children** in your household. Please see below for how to document **court-ordered child support** or **informal child support** that was not ordered by a court.

Child support documentation must include ALL information below for us to use it for processing…

1. The name of parent/guardian who is **receiving** the payments
2. The **range of dates** covered by the report
3. The **date** each payment was made
4. The documentation must indicate that the payments are for **child support**.

Acceptable types of documentation for COURT-ORDERED child support:

1. **PREFERRED: 13-month report** of child support payments received—If your child support was ordered by a court in North Carolina, please go to https://ncchildsupport.ncdhhs.gov to access a copy of this report; **OR…**

2. Report of payments received for the **most recent 3 FULL months** from the date of application. **For example,** if you date your application for May 30th, your child support report must be dated for **February 1st – April 30th**—If your child support was ordered by a court in North Carolina, please go to https://ncchildsupport.ncdhhs.gov to access a copy of this report. **OR…**

3. smiONE statements for the **most recent 3 FULL months** from the date of application. For example, if you date your application for May 30th, please submit smiONE statements for the **full months** of **February, March, & April; OR…**

4. As long as it reflects the amount of child support that the custodial parent **actually receives**, families may document child support income by submitting a copy of the **court order** showing the amount of child support that the non-custodial parent has been ordered to pay.

Acceptable documentation for INFORMAL child support—NOT ordered by a court:

A written statement from the **non-custodial parent** including **ALL** information below:

1. Recent date
2. **TO WHOM** the child support is paid
3. The child/ren **FOR WHOM** the payments are made
4. The **amount** of child support paid
5. **How often** the child support is paid
6. Name & signature of **non-custodial parent** who makes the child support payments
7. Telephone number of **non-custodial parent**.

- **Does anyone in your household receive SOCIAL SECURITY or (SSI) SUPPLEMENTAL SECURITY INCOME PAYMENTS?**

If you or anyone in your household receives **Social Security or (SSI) Supplemental Security Income payments**, please go to **https://www.ssa.gov** to access a copy of your most recent **benefit verification letter.** Please submit a copy of this letter with your application.

- **Does anyone in your household receive UNEMPLOYMENT PAYMENTS?**

If you or anyone in your household receives **unemployment payments**, please submit a report of payments received for the **most recent 8 weeks**. If your unemployment benefits were processed by the state of North Carolina, please go to **https://www.des.nc.gov** to access a copy of this report.

3. If you are applying for more than one child, please submit a **separate** application for each child.

4. If a minor parent (under the age of 18) needs child care assistance for his or her child so that the parent can work or go to school, the **minor parent** must fill out and sign the child's Scholarship application.

5. We only accept **complete** applications.

   Once you have gathered **ALL** required documentation listed in the gray box on page 1 of the Scholarship application **that applies to your family,** please submit your application and supporting documentation to us as follows…

   A. **Please make sure that the applicant child's name is on any information submitted to Smart Start of Davidson County and address it to the Scholarship program. Then…**

   B. Scan and email your information to julias@partnershipforchildren.org or lorih@partnershipforchildren.org **OR…**

   C. Drop off your information in person at **820 Grimes Boulevard Lexington, NC 27292.** Our office is open **Monday - Friday from 8 am – 5 pm.** Should you arrive outside of normal business hours, there is a locked drop box at the side entrance of our building where you can leave your information. **OR…**

   D. Mail your information to: **820 Grimes Boulevard Lexington, NC 27292**—Please call to make sure that we received your information. **OR…**

   E. Fax your information to: **336-249-6687**—Please call to make sure that we received your information.

6. In the meantime, we encourage you to begin looking for a **4 or 5-star rated child care facility** in **Davidson County** approved to work with the Child Care Scholarship Program. If you need help choosing a facility, please call the **Child Care Resource Center** at **336-245-4900** or visit their websites at **www.findchildcarenc.org** or **https://childcareresourcecenter.org.** They can provide referrals based on your family's individual needs. Please let them know that you are **in the process of applying for a Child Care Scholarship with Smart Start of Davidson County.** If you have difficulty finding openings at this time, a good strategy would be to add your name to the waiting list at all **approved facilities** of your choice that are **conveniently located** to you.

7. **PLEASE NOTE:** Should your child start attending a child care facility **before** you have been approved for and signed a **Child Care Scholarship contract,** please be aware that our program does not "back pay." Once your application has been approved, your Scholarship will not take effect until the **start date** listed on your **signed** Scholarship contract.

Thank You for Your Interest in Our Program!

We Look Forward to Hearing from You Soon!

Yours in High Quality Child Care,

The Smart Start of Davidson County

Child Care Scholarship Team