UW-Superior
Child Care Subsidy Program
2013-2014 Application
for Fall 2013, Spring 2014, and Summer 2014

Eligibility:
The UW-Superior Child Care Subsidy Program is a subsidy granted to UW-Superior students with children in the child care centers listed below. The information in this application is requested so your eligibility can be determined, which is based on: 1) student status and credit load, 2) number and ages of children in care, and 3) other financial support (county assistance…).

A student-family can receive a child care subsidy award if 1) you have children enrolled in New Horizon's Child's Center of Superior, YMCA Discovery Program, Noah's Ark, Superior Children's Center or Newborn @ School Education Inc and 2) enrolled at UW-Superior for each semester in which you seek support. One award is granted each semester to a student-family.

Application Process:
- Answer ALL application questions and attach a copy of the birth certificate for each child you are seeking child care support.
- Return completed application and attachments to the Yellowjacket Union Information & Service Desk by the deadline below.
- Note: The application only needs to be completed once during the 2013-2014 academic year.

Application Deadlines:
Fall Semester 2013: Application accepted August 15, 2013 to October 15, 2013.

Note: You may apply for a child care subsidy at any time, but early applications are advised. We cannot always guarantee that there will be financial support available to fund late applications.

Application Notification:
Once an eligibility decision has been made, you will be notified via your UW-Superior e-mail account and asked to complete an acceptance form.

Acceptance of Award:
Each semester student-families will be contacted to be sure the subsidy is still needed.

Note: We cannot process your billing invoice until the care has been provided.
* Funds are only provided to student-families who's child(ren) are attending New Horizon's Child's Center of Superior, YMCA Discovery Program, Noah's Ark, Superior Children's Center, or Newborn 2 School Education Inc.
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**PLEASE PRINT CLEARLY OR TYPE**

<table>
<thead>
<tr>
<th>Applicant Information</th>
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<tbody>
<tr>
<td><strong>DATE OF APPLICATION:</strong></td>
</tr>
<tr>
<td>Student ID Number: (Please check ONE) New applicant □ Previous applicant □</td>
</tr>
<tr>
<td><strong>NAME:</strong> Last First MI</td>
</tr>
<tr>
<td>Address:</td>
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<tr>
<td>Date of Birth: [MM/DD/YYYY e.g., 01/01/2003]</td>
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Are you planning to graduate this current academic year? YES □ NO □
If yes, indicate semester of graduation: (check one) Fall 2013 □ Spring 2014 □ Summer 2014 □

**CHECK WHICH CHILD CARE CENTER YOUR CHILDREN ARE ENROLLED IN:**
New Horizons Child’s Center of Superior □ YMCA Discovery Program □ Noah’s Ark □
Superior Children’s Center □ Newborn 2 School Education Inc. □
Please indicate the number of days per week child(ren) are in the center ______

**CHECK ALL THE TERMS YOU WILL BE ENROLLED AT UW-SUPERIOR AND ARE APPLYING FOR SUBSIDY FUNDS:**
Fall 2013 □ Spring 2014 □ Summer 2014 □

**Family Information**

Current Family Information (CHECK ALL THAT APPLY):

- □ a. Single
- □ b. Married □ c. Married, living with extended family

  Spouse is a student: □ YES □ NO □ If yes, Student ID# ______________
  Enrolled: □ PT □ FT at __________________________ (name of institution)
  Spouse works outside home _______ number hours per week.
  Employer: __________________________ Phone: __________________________

  Spouse is not a student and does not work outside the home. □

- □ d. If you are legally separated, please provide the date of your legal separation __________
- □ e. Other: __________________________

Name of spouse Last First MI

Name and DOB for child(ren) in licensed child care:
1) _________________________ DOB __________
2) _________________________ DOB __________

If you have more than 2 children in child care, please attach the above information on a separate sheet.
• I verify the information provided on this application is true, accurate, and complete.
• I understand that Child Care Subsidy Program funds are only to be used for costs associated with my child(ren)s child care costs
• I give my permission for the Associate Dean of Students office to communicate with my child care provider(s) regarding this application
• I will submit a copy of my child(ren)s birth certificate
• I understand it is my responsibility to pay the child care center the balance of the child care bill. If in the event the balance is not paid, I understand that I will not be eligible for a child care subsidy until the balance is paid.

**Signature of UW-Superior Student:**

Reminders:
  o Attach a copy of a birth certificate of each child in our on campus child care center(s) if you previously haven’t provided these to the office.
  o Keep a copy for your file.

Return to: University of Wisconsin – Superior
            Tammy Fanning
            Attn: Child Care Subsidy Program
            PO Box 2000
            Superior, WI 54880

Thank you!