



YMCA CHILDCARE RESOURCE SERVICE CERTIFICATE FOR CHILD CARE SERVICES

PARENT NAME is a participant certified for YMCA Childcare Resource Service Child Care Assistance Program and is approved for subsidized child care services.

If the parent's services are changed or terminated during the approval period, this certificate will then be invalid and replaced.

| | |
|------------------------------------|----------------------------------|
| CARE START DATE: 10/01/2014 | CARE END DATE: 09/30/2015 |
|------------------------------------|----------------------------------|

| | |
|--|-----------------------------|
| Provider: PROVIDER NAME PROVIDER ADDRESS PROVIDER CITY, STATE 92821-1234 | Provider ID #: 11111 |
| Provider Type: <input type="checkbox"/> Licensed Family Child Care <input checked="" type="checkbox"/> Center <input type="checkbox"/> License-Exempt | |

TYPE OF ACTION

| | | | |
|--|--|--|---|
| <input type="checkbox"/> Start of Service | <input checked="" type="checkbox"/> Change in Service or Reimbursement Amount | <input type="checkbox"/> Termination of Service | <input type="checkbox"/> Termination of Service for Delinquent Fee |
| The children listed have been approved for subsidized child care services. | <input type="checkbox"/> Hours/days <input type="checkbox"/> See attached Notice <input type="checkbox"/> Amended Rate <input type="checkbox"/> Family Fee <input type="checkbox"/> Birthday Rate Change <input type="checkbox"/> Other: _____ <input type="checkbox"/> Provider Rate Change _____ | The last day YMCA will reimburse for child care is: _____ | The last day YMCA will reimburse for child care is: _____ |
| Comments: (Sample text: On 10/01/2014, the Recertification to determine continued need and eligibility for childcare services was approved. Each child authorized on the program is listed above, however childcare hours have not been authorized due to you not having a provider. Hours will be approved once you have chosen a provider with an active agreement.) | | | |

CHILDREN APPROVED FOR CARE

| | | | | | | | |
|-------------------------------|---------------|----------------------------|----------------|------------------|-----------------|---------------|---------------------------|
| Child Name: Child Name | DOB: | School: School Name | | | | | Track: Traditional |
| | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| Vacation | | 9:00am-5:00pm | 9:00am-5:00pm | 9:00am-5:00pm | 9:00am-5:00pm | 9:00am-5:00pm | |
| School | | 9:00am-5:00pm | 9:00am-5:00pm | 9:00am-5:00pm | 9:00am-5:00pm | 9:00am-5:00pm | |

MAXIMUM REIMBURSEMENT RATES

The Maximum Reimbursement Rate means the most the state will pay based on the parent's verified need. If the parent chooses a child care provider who charges **less** than the maximum rate, then the provider will be paid what they usually charge. If the parent chooses a provider who charges **more** than this maximum rate, the parent will have to pay the difference.

If the parent has an unpredictable/on-call child care schedule, reimbursement will be based on the **actual** child care provided within the authorized days and hours.

| Age | Category | Maximum Amount |
|-------|----------|--|
| 2 - 5 | Monthly | Part Time \$545.92/ Full Time \$665.75 |
| 6 + | Monthly | Part Time \$483.33/ Full Time \$599.65 |

FAMILY FEE

| Monthly Family Fee (if any) | | | Part Time (less than 130 hours per month) | | | | | Full Time (130 hours or more per month) | | | |
|---------------------------------|--------|--------|---|--------|--------|--------|--------|---|--------|--------|--------|
| Effective Date: 10/01/14 | | | \$75.00 | | | | | \$150.00 | | | |
| Oct 14 | Nov 14 | Dec 14 | Jan 15 | Feb 15 | Mar 15 | Apr 15 | May 15 | Jun 15 | Jul 15 | Aug 15 | Sep 15 |
| PT | PT | FT | PT | PT | PT | FT | PT | PT | FT | FT | PT |