

MAYLAND COMMUNITY COLLEGE CHILDCARE PROJECT FACT SHEET

We're here to help you succeed!

WHAT IS THE CHILDCARE PROJECT?

The Childcare Project is a state funded program that provides childcare assistance for children of students enrolled in a curriculum program at Mayland Community College, who otherwise would be unable to attend school.

WHAT ARE THE ELIGIBILITY REQUIREMENTS?

Students must have their child/children enrolled in a licensed childcare facility. Full or part time students who are enrolled at MCC for a minimum of nine (9) credit hours are eligible for the program. Funds will be awarded based on family size, verified income, financial need, student's enrollment status (i.e. full-time or part-time) and student's grade point average.

HOW DO I APPLY?

Fill out an application which can be obtained from Martha Huskins in Room 139 and return it to her along with a current class schedule, current transcript (from the last educational institution you attended) and a copy of your most recent tax return. If you did not file taxes in the last tax year, you will need to fill out a low income verification form which you can also get from Martha. Students are rated and selected based on GPA, income, financial need and fulltime/parttime status.

HOW MUCH DOES THE CHILDCARE PROJECT PAY?

The Childcare Project will pay at least one half of your entire parent portion. Students are encouraged to seek subsidy from other agencies such as the Department of Social Services or the Work Force Investment Act in their county.

DOES THE CHILDCARE PROJECT PAY FOR CHILDCARE YEAR ROUND AS LONG AS I AM A STUDENT?

No. According to state guidelines, all childcare funds must be expended by the end of the fiscal year. Childcare funds are paid from September 1 through May 30 of the current school year. No childcare is paid during the summer.

HOW LONG WILL I RECEIVE CHILDCARE ASSISTANCE?

Once a student is accepted into the Project, as long as they remain eligible, he/she will receive assistance for approximately 2 years or until they no longer need childcare assistance, whichever comes first. Applications will be re-evaluated each year to ensure student remains eligible.

Mayland Community College

Childcare Project Application (Application must be accompanied by student's transcript, current class schedule and a copy of student's current tax return. If student did not file taxes last year **or** student's total household income was less than \$8,000, application must be accompanied by a low income verification form.)

APPLICANT INFORMATION									
Last Name		First		M.I.		Date			
Street Address					Apartment/Unit #				
City				State		Zip Code			
Phone			E-mail			Gender	<input type="checkbox"/> M	<input type="checkbox"/> F	
Date of Birth			Age			Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Single	
SSN or Student ID #				Program Enrolled In:					
Student Status	<input type="checkbox"/> New Full-Time		<input type="checkbox"/> New Part-Time		<input type="checkbox"/> Returning Full-Time		<input type="checkbox"/> Returning Part-Time		
Number of hours enrolled:		GPA		GED		Anticipated Date of Graduation			
EMPLOYMENT INFORMATION									
Are you currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If "Yes," name of employer:			Employer Phone:			
Job Title			Hours worked per week:			Monthly earnings:			
Is your spouse currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If "Yes," name of employer:			Employer Phone:			
Job Title			Hours worked per week:			Monthly earnings:			
FINANCIAL INFORMATION									
How many people, including yourself are in your household?					Number of dependents in household				
Are you:	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed				
Complete the following information based on your and, if married, your spouse's Federal Income Tax form for the previous year. You will find this information on the first two pages of your Federal Income Tax form.									
Your adjusted gross income (if filed separately)	\$				Taxable Income	\$			
Your spouse's adjusted gross income (if filed separately)	\$				Taxable Income	\$			
Total household adjusted gross income (if filed jointly)	\$				Taxable Income	\$			
Income Changes / Special Circumstances: If any of the income information reported above will be different during the coming year (including wage changes, lay-offs, unemployment, health expenses, etc.), please explain in detail and state to the best of your knowledge what your income will be:									
Check benefits received:	Social Security Benefits				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Amount:		
	Unemployment Benefits				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Amount:		
	Other:				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Amount:		

Check below all types of financial assistance you will be receiving for the coming year and the amounts you expect to receive. If you expect to receive a particular type of assistance, but the amount is unknown, indicate with a "?"

Income Source	Amount	Income Source	Amount
<input type="checkbox"/> Pell Grant		<input type="checkbox"/> Vocational Rehab.	
<input type="checkbox"/> VA Benefits		<input type="checkbox"/> Food Stamps	
<input type="checkbox"/> Student Loan		<input type="checkbox"/> AFDC / ADC	
<input type="checkbox"/> Scholarship(s)		<input type="checkbox"/> College Work-Study	
<input type="checkbox"/> WAMY		<input type="checkbox"/> Student Loan	
<input type="checkbox"/> HUD		<input type="checkbox"/> Other (Child Support, etc.)	

CHILDREN'S INFORMATION

Do you currently have children enrolled in a licensed childcare facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Facility:		Phone	
If your children are currently enrolled, amount of childcare expenses you are responsible for:				\$	
Are you eligible for childcare funds from another source such as Social Services?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Source:		Amount	\$
Have you applied for displaced worker benefits such as WIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Source:		Amount	\$

List below the names and ages of all children requiring childcare:

Child's Name	Age	Date of Birth

DISCLAIMER AND SIGNATURE

Full- or part-time students who are enrolled at MCC for nine (9) or more credit hours are eligible for these limited budget funds. Funds will be awarded based on family size, verified income, financial need, student's enrollment status (i.e. full-time or part-time) and student's grade point average.

I certify that these responses are true. I am aware that in order to remain eligible for childcare funds, I must be enrolled for a minimum of nine (9) credit hours and must attend 90% of class meetings per semester, and that the same percentage applies to my child's attendance at the childcare facility.

Applicant Signature

Date

For MCC use only.

Does student qualify for Pell? Yes No

Student's Unmet Need: \$ _____