

## SUBSIDIZED CHILD CARE APPLICATION INSTRUCTIONS

The University of California **Early Childhood Education Program (ECEP)** is open Monday through Friday from 7:45 a.m. to 5:30 p.m. We offer **full time** early childhood education to children ages **three months to 55 months**. Children entering in the fall semester must be within this age range as of the first day of regular University instruction. Infants must be at least 3 months by the first day of the new school year (in August) to be age eligible for enrollment. Part-time child care is not available.

### WHAT TO SUBMIT WITH THIS APPLICATION

#### 1. Income Verification.

**Provide copies of all family income sources. Verification may include, but not limited to:**

- One month of most recent earnings statements or check stubs
- Financial Aid Award Letter, fellowship, scholarships, government support, or sponsorship letters, etc.
- Income tax statement from previous year (only for seasonal or self-employed parents)
- Cash Aid/Food Stamps Notice of Action benefits
- Child support/alimony payments
- Verification of any other income sources listed on page 2 of this application

#### 2. Need Eligibility (reason for needing child care).

UC Berkeley students submit a copy of their class schedule(s). Students can print it out from Cal Central student account. Class schedule must contain your full name, semester term, class times, and number of units. Students must be enrolled in a minimum of 12 units to be eligible for full time childcare.

Employed parents submit one-month worth of most recent pay stubs.

#### 3. Proof of California Address. Proof of California address is required to apply for state subsidy. Third party verification may include copy of rental lease agreement or any major utility bill.

### WHERE TO SUBMIT THIS APPLICATION

Complete all three pages of the subsidized application and include supportive documents to verify income and need eligibility. Submit the application to the UC Berkeley Early Childhood Education Program by email at [ecep@berkeley.edu](mailto:ecep@berkeley.edu).

### ELIGIBILITY REQUIREMENTS

ECEP reserves a number of subsidized spaces for UC Berkeley students who meet need and income eligibility requirements set by the California Department of Education.

**Income eligibility** is determined based on family size and a family's total monthly gross income. See income ceiling on the next page.

**Need eligibility** is the reason a family needs child care. If there are two parents in the home, both parents must have a reason for needing child care. Need eligibility options are stated below:

- At least one parent is a registered UC Berkeley student
- Second parent must be engaged in one of the following:
  - a) Working (full time 35-40 hours per week)
  - b) Education or vocational training leading directly to a recognized trade, paraprofession, or profession
  - c) Actively seeking employment
  - d) Parent is incapacitated because of medical or psychiatry special need
  - e) Homeless and seeking permanent housing
  - f) Enrolled in an educational program (GED or ESL)

## FEEES

Fees are based on a sliding scale set by the State Department of Education, and are assessed based on family size and gross monthly income. Monthly family fees may range from no fee to \$632.

## APPLYING AS A SINGLE PARENT

The California Department of Education no longer requires supportive documentation to verify single parent status. Instead, upon enrollment parents must signed a declaration under penalty of perjury self-certifying single parent status; however, court documents are required to verify child's custody arrangements, restraining orders (when applicable), etc.

## ENROLLMENT PRIORITIES

Families are enrolled following the enrollment priorities set by California Department of Education, which requires prioritizing families as follows:

- 1<sup>st</sup> priority. CPS and At Risk Children
- 2<sup>nd</sup> priority. Sibling of currently enrolled children
- 3<sup>rd</sup> priority. UC Berkeley student families with the lowest gross monthly income

## INTERNATIONAL STUDENTS

Any document in a foreign language required for enrollment must be professionally translated to English. Enrollment documents may include Scholarship/fellowship letter, birth certificates, child's immunization and parents' immunization records. The child's' physician's report will be required at the time of enrollment. Proof of California address is required to apply for subsidy. Parents may apply with their home country address and as soon as proof of California address is available provide a copy to the Admissions Coordinator.

## WHAT TO EXPECT AFTER YOU HAVE APPLIED

Upon receiving the application, an email is sent to parent (s) to confirm that the application was received. If additional supporting documents are needed to verify income and need eligibility, the Admissions Coordinator will inform parent (s) of any required documents needed. If a space is available, the Admissions Coordinator will contact parent (s) via email with a child care offer. Be sure to provide a clear email in the application. You may contact the Admissions Coordinator at [moreida@berkeley.edu](mailto:moreida@berkeley.edu) or by phone at 510-643-1482.

## ELIGIBILITY WAITING LIST

When a vacancy is available, an offer is made as soon as the application is received. If a vacancy is not available, the application may be placed on our eligibility waiting list. To be placed on our waiting list, the application must contain all supporting documents necessary to verify eligibility.

Subsidized applications are placed on the eligibility waiting list according to the California Department of Education income ranking and family size. Families with lowest income are admitted first before families with higher income regardless of the date the application is received. As a result, a family's position in the waiting list may change when new families with lower income are added to the waiting list; therefore, applying early in advance does not necessarily mean that the application will be placed first in the waiting list.

## FOR INFORMATION AND QUESTIONS

Visit us at our main office at 2339 Haste St. Berkeley, CA 94720 or contact us via email at [ecep@berkeley.edu](mailto:ecep@berkeley.edu) or by phone at 510-642-1827.

## INCOME CEILING EFFECTIVE JULY 1, 2018

Family Size	Gross Monthly Income
1 or 2	\$5,067
3	\$5,466
4	\$6, 383
5	\$7,404
6	\$8,426
7	\$8,617
8 or more	\$8,809

Date you would like child to START being considered for entry \_\_\_\_\_

**UC Student/Parent1/Guardian**

\_\_\_\_\_ Home/Cell Phone \_\_\_\_\_ UC ID \_\_\_\_\_  
 Last First

UC Berkeley Email Address \_\_\_\_\_ Personal Email Address \_\_\_\_\_

**Parent 2/guardian** \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_ UC ID \_\_\_\_\_  
 Last First (if applicable)

UC Berkeley Email Address \_\_\_\_\_ Personal Email Address \_\_\_\_\_  
 (if applicable)

Home Address \_\_\_\_\_  
 Street City, State Zip Code

Child(ren)'s Name(s) and Birthdate(s) for whom you are applying (children must be at least 3 months old by the first day of the school Year (August) to be age eligible for enrollment):

\_\_\_\_\_ Birth Date Racial/Ethnic Identity  
 Last First Boy/Girl

\_\_\_\_\_ Birth Date Racial/Ethnic Identity  
 Last First Boy/Girl

\_\_\_\_\_ Birth Date Racial/Ethnic Identity  
 Last First Boy/Girl

Is your child a foster child?  Yes  No

Does your child have an Individualized Education Plan (IEP)?  Yes  No

Child's living arrangements  Both parents  Mother  Father  Other \_\_\_\_\_

Total Number in your family size \_\_\_\_\_ (only include parents/guardians and children living in the same house)

List names, birthdates, and relationship to the parent of other children under 18 years old living at home (birth certificates will be required):

**UC BERKELEY STUDENT  
 REASON FOR NEEDING CHILD CARE  
 (check all that apply)**

Graduate  Undergraduate  
 \_\_\_\_\_ #unitsenrolled \_\_\_\_\_ Semester

Department Degree

GSI  GSR \_\_\_\_\_ % of time

Workstudy \_\_\_\_\_ #hrs./wk.

Other employment \_\_\_\_\_ #hrs./wk.

Unpaid Internship

**SECOND PARENT  
 REASON FOR NEEDING CHILD CARE  
 (check all that apply)**

\_\_\_\_ **ALSO** a UCB student  Grad  Undergrad  
 \_\_\_\_\_ # unitsenrolled \_\_\_\_\_ Semester

Department Degree

GSI  GSR \_\_\_\_\_ % of time

Workstudy \_\_\_\_\_ # hrs./wk.

Student at another campus \_\_\_\_\_  
 Where # units

Employed \_\_\_\_\_  
 Where #hrs/wk

Seeking Employment

**INCOME RESOURCES**

Report total **GROSS** monthly income for each item listed below. For seasonal workers and self-employed persons only, gross monthly income is computed by averaging total GROSS income received during the previous year. GSI/GSR employees report current gross monthly income, not an average over the academic year. In all cases, attach documentation as needed and described in the instructions, i.e. checkstubs, financial aid letter (income tax forms are acceptable for self-employed persons only). Indicate amounts pertaining to the time period for which you are applying.

**SOURCES OF INCOME**

**UC STUDENT**

**SECOND PARENT**

Money, wages or salary	_____ /mo.	_____ /mo.
Net income from self-employment	_____ /mo.	_____ /mo.
Social Security	_____ /mo.	_____ /mo.
Dividends, interest	_____ /mo.	_____ /mo.
Public Assistance/cash aid	_____ /mo.	_____ /mo.
Unemployment/disability benefits	_____ /mo.	_____ /mo.
Worker’s Compensation payments	_____ /mo.	_____ /mo.
Spousal Support	_____ /mo.	_____ /mo.
Child Support	_____ /mo.	_____ /mo.
Survivor benefits	_____ /mo.	_____ /mo.
Retirement Benefits	_____ /mo.	_____ /mo.
Rental Income	_____ /mo.	_____ /mo.
Foster Care Grant	_____ /mo.	_____ /mo.
Financial Assistance for Child	_____ /mo.	_____ /mo.
Veteran’s pensions and Annuities	_____ /mo.	_____ /mo.
Inheritance	_____ /mo.	_____ /mo.
Housing Included in Pay	_____ /mo.	_____ /mo.
Auto Included in Pay	_____ /mo.	_____ /mo.
Student Loans Living Expenses	_____ /mo.	_____ /mo.
Insurance Settlements	_____ /mo.	_____ /mo.
Net Gain from Property	_____ /mo.	_____ /mo.
GSI/GSR income	_____ /mo.	_____ /mo.
Fellowship/Scholarship Stipends	_____ /mo.	_____ /mo.

TOTAL GROSS (before taxes) MONTHLY INCOME (TOTAL ALL INCOME RECEIVED BY BOTH PARENTS LIVING IN THE HOUSEHOLD): \$ \_\_\_\_\_

**OFFICE USE ONLY:** TOTAL ADJUSTED GROSS MONTHLY INCOME \$ \_\_\_\_\_  
 Monthly fee half time \$ \_\_\_\_\_ full time \$ \_\_\_\_\_

**ACADEMIC FINANCIAL ASSISTANCE (FINANCIAL AID)**

For all academic assistance, divide total award by 10 for monthly amounts.

Grants	_____ /mo.	_____ /mo.
Loans	_____ /mo.	_____ /mo.

**OTHER INCOME**

Withdrawn savings	_____ /mo.	_____ /mo.
Private loans (include family support)	_____ /mo.	_____ /mo.

## HOURS OF OPERATION

We are a year-round program. Hours of operation are Monday-Friday 7:45 a.m.- 5:30 p.m.. Children are required to attend year-round including summer and semester breaks. Part-time childcare is not available.

Any Additional Notes you want to include:

## FOR FURTHER INFORMATION

Please visit our website at <https://ece.berkeley.edu/> or contact us at 510-642-1827 [ecep@berkeley.edu](mailto:ecep@berkeley.edu) or [moreida@berkeley.edu](mailto:moreida@berkeley.edu)

By checking the following boxes, as Parent or Legal Guardian, you agree to the application and enrollment policies.

I verify that the information I have provided is true and correct. In addition, I understand that:

Completion of this form does not guarantee placement in UC Berkeley Early Childhood Education program

Eligibility for service is based on income, need eligibility, and UC Berkeley student status. Change in UC Berkeley student status may affect eligibility

I must provide all requested documentation necessary to verify income and need eligibility

Families must update the Eligibility Application any time there is a change in family status (i.e. change in income, the number in the family, or the number of parents in the home)

Eligibility Applications remain active for the entire school year (August - July) or until a family is called for an opening, no longer qualifies for services, or asks to be removed from the waiting list.

Falsifying any documentation presented to ECEP regarding eligibility or providing false information is considered fraud and consequently, may be grounds for denial or termination of subsidized child care.

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

(if applicable)

### IMPORTANT

**Please include income verification and class schedule for current semester or class schedule for the semester you are applying for with your application. If there are two parents in the family, include or state 2<sup>nd</sup> parent reason for needing child care and verification (if applicable) for the reason of needing child care.**

Please submit your application by one of the following methods:

In person or By regular mail at:

**UC Berkeley, ECEP**

**2339 Haste St.**

**Berkeley, CA 94720-7416**

Or

To our departmental email at:

**[ecep@berkeley.edu](mailto:ecep@berkeley.edu)**

All information will be kept strictly confidential by the UCB Early Childhood Education Program.

We will contact you via email to let you know your application was received.

UC Berkeley, ECEP is an equal opportunity provider and employer (EOE).