

COVID-19 Financial Assistance for Emergency Child Care

If you are an essential worker of COVID-19 Essential Businesses and Operations (as defined in Executive Order 121) and are in need of emergency child care because of COVID-19 closures, there are a number of resources available to ensure that your children are safe and taken care of.

1. To receive information about local options for children from infants through age 12, call the hotline at **1-888-600-1685**. Families will be connected with child care programs that agree to meet updated health, safety and operational guidelines.
2. After calling the hotline, contact **the recommended child care program** to receive the proper enrollment forms.
3. If you are an essential worker who needs financial assistance for emergency child care, complete the COVID-19 Parent Application for Financial Assistance for Emergency Child Care submit it to your child care provider. You can also fill out a hard copy of this form at your child care facility. (A copy of the application is attached.)

Effective April 1, 2020, essential workers can get financial aid for child care through an Emergency Child Care Subsidy Program. Financial assistance will be offered for at least April and May.

Summary of Eligibility Criteria for Subsidized Child Care:

- Have household income below 300% of the Federal Poverty Level.
- Be an employee of a COVID-19 Essential Business and Operation, as referenced in the Governor's Executive Order 121:
 - Emergency staff, first responders, or public safety officers
 - Hospital staff and front-line health care workers
 - Nursing and adult group home staff
 - Child care program staff
 - Food service staff
 - Other employees working to keep communities safe and healthy during COVID-19

Additional eligibility criteria may also apply. Information is shown on the attached application.

Website address for additional information:

<https://ncchildcare.ncdhhs.gov/Whats-New/Coronavirus-Information-for-Child-Care/covid-19-parent-application-for-financial-assistance-for-emergency-child-care>



COVID-19 GUIDANCE FOR CHILD CARE PROVIDERS ON PARENT APPLICATION FOR FINANCIAL ASSISTANCE FOR EMERGENCY CHILD CARE

April 1, 2020

Effective April 1, 2020, parents/caregivers who are essential workers and need financial assistance for child care can complete a *COVID-19 Parent Application for Financial Assistance for Emergency Child Care* (known as "Parent Application"). Families should submit the application to a child care provider that is approved to remain open and is accepting new enrollments from families with essential workers. This guidance outlines steps that child care providers should take with regard to the Parent Application.

I. Print copies of the Parent Application ([available here](#)) and have them available at your facility for parents to fill out if needed.

Ensure that sufficient copies of the form are available at your facility every day.

Parents/caregivers can also download and fill out the application and bring the completed application to your facility, or may fill out a hard copy at your facility.

II. Instructions for Reviewing the Parent Application

The child care provider should ensure all the following items are completed on the application:

- Parent/Caregiver Information and Children Information is complete.
- All declarations have checked boxes.
- Number of individuals in the household is complete.
- Category of Essential Business and Operation is complete, with place of work complete.
- Question IV (Have you ever been disqualified from the NC Subsidized Child Care Assistance Program?) should be checked NO. If checked YES, the provider should contact the Subsidy Unit of DCDEE at 919-814-6380.
- Question V (Do you have assets that exceed one (1) million dollars?) should be checked NO. If checked YES, the provider should contact the Subsidy Unit of DCDEE at 919-814-6380.
- Question VI (Do you need child care greater than 55 hours per week?) should be checked NO. If checked YES, the provider should contact the Subsidy Unit of DCDEE at 919-814-6380.
- Question VII (Voter Registration): If the parent would like to register to vote, please provide them a copy of the voter registration form to complete and ask them to mail to their county Department of Social Services.
- Question VIII (U.S. Citizenship Status) should have a checked box.
- Statement of understanding should have a checked box.
- Form should be complete and **signed by the parent or caregiver**.
- The provider should keep a hard copy of each Parent Application on file for future audit purposes. Now the provider may enroll the child into their child care program (parent/caregiver will complete normal enrollment process).

COVID-19 Parent Application for Financial Assistance for Emergency Child Care

You can receive free emergency child care for April and May 2020 (subject to the availability of funds) if you are an essential worker responding to the COVID-19 crisis, you have an emergency child care need and no other child care options, AND you have a household income below the allowed limit. Please complete and sign this application in order to request financial assistance for child care.

PLEASE FILL OUT AND SUBMIT THIS FORM DIRECTLY TO YOUR CHILD CARE PROVIDER.

I. Parent/Caregiver Information:

Legal Name:

FIRST

MIDDLE

LAST

SUFFIX

Household Street Address:

Apt/Suite #:

THE PLACE WHERE YOU CURRENTLY LIVE

City:

County:

State:

Zip Code:

Mailing Address:

Apt/Suite #:

LEAVE BLANK IF SAME AS HOUSEHOLD ADDRESS

Cell Phone:

Home Phone:

Email:

Date of Birth:

II. Children Information:

List all children for whom you need emergency child care.

	Child First Name	Child Middle Name	Child Last Name	Child Date of Birth
1				
2				
3				
4				

III. I declare that: PLEASE CHECK BOXES BELOW.

- I currently have no alternative child care options, and without emergency child care, my child(ren) would have no caregiver while I work.
- My household has _____ individuals, and my household income is below the income limit based on the number of people in my household (see chart below):

Persons in Household	2	3	4	5	6	7	8
Income Limit	\$51,720	\$65,160	\$78,600	\$92,040	\$105,480	\$118,920	\$132,360

*For household size greater than 8 people, add \$4,480 for each additional person starting with the 9th person.

*Households with income above the indicated limits do not need to fill out this form to access care and will be charged full price by the provider.

- I am an employee of a COVID-19 Essential Business and Operation, as referenced in the Governor's [Executive Order 121](#).

Please check which category of Essential Business and Operation you work in:

- Emergency staff, first responders, or public safety officers
- Hospital staff and front-line healthcare providers
- Nursing and adult group home staff
- Child care program staff
- Food service staff
- Other employees working to keep our communities safe and healthy during COVID-19
(please list employer): _____

IV. Have you ever been disqualified from the NC Subsidized Child Care Assistance Program? Yes No

V. Do you have assets that exceed one (1) million dollars? Yes No

VI. Do you need child care greater than 55 hours per week? Yes No

If parent answers Yes to questions IV, V, or VI, child care provider should contact the DCDEE Subsidy Unit at 919-814-6380.

VII. Voter Registration

Are you registered to vote? Yes No If you are not registered to vote where you live now, would you like to apply to register to vote here today?
 Yes No

You can also register to vote online here: English - https://dl.ncsbe.gov/Voter_Registration/NCVoterRegForm_06W.pdf or Spanish - <https://www.ncsbe.gov/Portals/0/Forms/NCVoterRegForm09W.pdf> (If you do not answer the question, you will be considered to have decided not to register to vote at this time).

VIII. U.S. Citizenship Status: SELECT ONE.

- Child(ren) is a U.S. Citizen
- Child(ren) is a legal U.S. Non-Citizen (residing in the U.S. legally). This includes Refugee, U.S. Citizen/Naturalized Citizen, U.S. Non-Citizen National, or Documented Alien.

I understand that this emergency care will only be provided for April and May 2020. I understand that after May 31, 2020, additional months of emergency child care may be available if needed and should funding be available. I understand that I may also be eligible for subsidized care based on my income and continued need for care after the emergency child care program has ended. I will contact my local Department of Social Services to inquire about applying for subsidized child care after the emergency child care program ends.

SIGNED:

Parent Signature: _____

Date: _____

The information provided is true and accurate, and I have not knowingly made a false statement or misrepresented a material fact, omitted or failed to disclose a material fact, or submitted inaccurate records. I understand that an intentional false statement or representation, omission, or submission of inaccurate records may lead to sanctions or other legal actions.

PLEASE FILL OUT AND SUBMIT THIS FORM DIRECTLY TO YOUR CHILD CARE PROVIDER.

