

**Eagle Valley Child Care Association
Sliding Scale Application**

Parent Information

Parent/Guardian 1

First Name	Last Name	Address	Phone Number

Employer	Position	# Hours Worked Per Week

Parent/Guardian 2

First Name	Last Name	Address	Phone Number

Employer	Position	# Hours Worked Per Week/Work Schedule

Legal Status of Parents (Please circle):

Married Separated Divorced Single Deceased

If either/both parent(s) are remarried:

Name of Step-Parent: _____

Name of Step-Parent: _____

If parents are separated/divorced, with which parent does the child (ren) live?

What are the terms of the divorce/separation with regard to child support and/or alimony?

Family Information

How many people live in your household? _____

Child's Name	Date of Birth	Classroom Assignment at EVCCA Early Childhood Programs	# of Days Attended at EVCCA Early Childhood Programs

Family Financial Income:

Please attach a copy of your W-2 forms for the most recent tax year. Please also attach a copy of your Federal Income Tax Return (Form 1040) for the most recent year in which you have filed. Applications without the additional documentation will not be reviewed.

Please describe any circumstances that the EVCCA Board should be aware of in terms of your employment (e.g., seasonal, reduced hours, etc).

If parent(s) are unemployed, what are your intentions/prospects with regard to employment?

Annual GROSS Earnings:

	2015 Earnings	2016 Earnings	Projected 2017 Earnings
Parent 1 Income			
Parent 2 Income			
Other Income (specify**)			
Total			

** Other income includes interest, dividends, self-employment, alimony, child support, social security, trust fund income, etc.)

Family Assets

Please answer the following questions:

Total value of Savings Accounts	
Total value of Stocks/Bonds	
Do you own your home/apartment/property?	
If own, what is the value of your residence?	
Do you own/rent a second home?	
If own, what is the value of your 2 nd home?	
Are there any trust accounts for either parents or children? Please provide additional information if applicable.	
Do you own an automobile?	
Do you own a recreational vehicle or boat?	

Family Expenses

Please outline your families' expenses below:

Expense	Monthly	Annual
Rent/Mortgage		
Utilities		
Loan Payments (auto & credit cards)		
Educational Expenses (after school care, summer camp, child care for ALL children in your family)		
Other:**		

** Please list any extraordinary family expenses that you feel are relevant to this application.

Has your family applied to the CCAP Program (Colorado Child Care Assistance Program)? What is the status of that application?

Signature: _____ Date: _____