

Newton Child Care Commission and Fund, Inc.  
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Newton, Massachusetts 02460  
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**SCHOLARSHIP LOTTERY APPLICATION  
FOR  
July 1, 2011 - June 30, 2012**

**Give information only for family members living in your household**

Parent Parent  
Name(s) \_\_\_\_\_  
Street address \_\_\_\_\_  
City/State/ Zip Code \_\_\_\_\_  
Home Tel. # \_\_\_\_\_  
Work Tel. # \_\_\_\_\_  
E-mail address \_\_\_\_\_

Do you (circle one): Own your home Rent Live with family Other

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Separated or Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

Children – please list all children living in your household (even if not requiring child care)

<u>Name</u>	<u>Age</u>	<u>DOB</u>	<u>Days/Hrs. Child Care Needed Per Week</u>	<u>Program/School/Camp</u> <u>Child Does/Will Attend</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please circle the cultural ethnic heritage of your child(ren):

African American Asian Caucasian Hispanic Native American Biracial Other

**INCOME INFORMATION**

***YOU MUST ATTACH A COPY OF YOUR 2010 FEDERAL INCOME TAX RETURN; IF YOU ARE NOT FILING A TAX RETURN FOR 2010, A STATEMENT OF INCOME MUST BE SUBMITTED WITH THIS APPLICATION (i.e.. SSI, SSDI, TANF, etc.).***

Your family's adjusted gross income in 2010 \_\_\_\_\_  
Additional income (i.e. child support, social security, pensions) \_\_\_\_\_  
Total 2010 Income/Support \_\_\_\_\_  
Number of family members living on this income \_\_\_\_\_  
What is your expected family income for 2011 \_\_\_\_\_

**WORKING STATUS OF PARENTS - (living in household):**

Occupation of Parent

\_\_\_\_\_  
Employer Name & Address \_\_\_\_\_

Do you work (if full-time, mark with an 'X'; if part-time, list hours as requested):  
Full Time \_\_\_\_\_ Part Time (list number of hours per week) \_\_\_\_\_

Occupation of Parent

\_\_\_\_\_  
Employer Name & Address \_\_\_\_\_

Do you work (if full-time, mark with an 'X'; if part-time, list hours as requested):  
Full Time \_\_\_\_\_ Part Time (list number of hours per week) \_\_\_\_\_

**IF YOU ARE ATTENDING SCHOOL OR A JOB TRAINING PROGRAM**

Parent:

Name of School

\_\_\_\_\_  
Attending Full Time \_\_\_\_\_ Attending Part Time (number of hours per week) \_\_\_\_\_

Parent:

Name of School

\_\_\_\_\_  
Attending Full Time \_\_\_\_\_ Attending Part Time (number of hours per week) \_\_\_\_\_

**If you are attending school or a job training program, you must attach the following:**

- 1) a copy of a current student ID
- 2) a letter from the registrar or a copy of a bill, verifying your enrollment in the program

Please describe any special circumstances that should be considered as part of this application.

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**Child Care Expenses and Assistance**

1. Are you currently receiving any financial support in meeting child care costs?  
Yes \_\_\_ No \_\_\_

2. Please check all that apply and indicate amount of support in dollars:

\_\_\_ Reduction in tuition or scholarship by child care provider \$ \_\_\_\_\_  
\_\_\_ Department of Children and Families subsidized slot \$ \_\_\_\_\_  
\_\_\_ Child Care Voucher through Child Care Resource Center \$ \_\_\_\_\_  
\_\_\_ Other financial support: \$ \_\_\_\_\_

3. Are you on a waiting list for any child care financial aid listed above? If yes, list below:

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4. Do you anticipate a loss of any current support with child care expenses in the near future?  
Please explain.

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5. What were your total child care expenses in 2010?

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6. What is your best estimate of child care expenses in 2011?

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## Eligibility and Income Affidavit

Name \_\_\_\_\_  
Adjusted gross income in 2010 \_\_\_\_\_

Number of persons living on this income \_\_\_\_\_

### Terms for Participation in the Newton Child Care Fund Lottery

I understand that in order to participate in the Newton Child Care Fund., Inc. Lottery, I must:

- be a Newton resident or have a child enrolled in the Newton Public School system
- meet the income guidelines
- be working and/or attending school
- not be receiving additional, substantial (**50% or more**) child care assistance
- for two parent households, both parents must be working and/or in school full-time (i.e. 30 hours per week for each parent)

I further understand that by meeting these guidelines, there is no guarantee that I will receive any funds, but that I may be included in the Child Care Fund Lottery if my eligibility is confirmed.

If selected through the Lottery, I will apply my award towards child care services provided by a licensed provider, and that payments will be made directly to this provider upon receipt of a bill for services rendered.

I understand that all services paid for by my award must be provided between July 1, 2011 and June 30, 2012 and that I must begin using my award by **September 19, 2011**. I further understand that I must make co-payments to my provider towards my child care expenses during the award period.

If I become ineligible during the award period (i.e. my income exceeds the maximum allowed; I am not working or going to school; I receive additional, substantial child care assistance; if I do not expend the full award; if I do not begin using my award by September 19, 2011, or if I move outside of Newton), I understand that any remaining funds will be reallocated by Newton Child Care Fund to another eligible family.

I give permission for the Newton Child Care Fund, Inc. to contact my child care provider and/or relevant child care service provider regarding verification of enrollment and tuition assistance for my child(ren).

I certify that I have read, understand and agree to the terms of the Child Care Fund Lottery stated above.

If I am found to have falsely presented my financial or working status, I understand that all unexpended funds will be returned to the general child care fund.

**I CERTIFY UNDER THE PENALTIES OF PERJURY THAT ALL THE INFORMATION I HAVE SUPPLIED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

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

*In order to be considered for the scholarship lottery, applications must be received in the NCCC&F office no later than May 6, 2011. All required documentation, as listed in this application, is also due by this date. Any and all paperwork can be mailed, faxed, or e-mailed. Addresses and phone numbers are listed on the top of page one of the application.*