



ECCES Classroom Placement: Parent/Guardian Declaration

Early Childhood Care & Education Services, UCSB
Orfaea Family Children's Center, University Children's Center

I understand that my child's placement at the ECCES/UCSB Children's Center begins on _____. I agree to pay for any UCSB Children's Center tuition costs at the monthly rate of \$ _____ until the CDE financial assistance contract is in effect for my child.

Signature

Date

Print name

(Cut Here)

For questions regarding CDE application status, please contact:

Mia Shellabarger

(805) 893-5307

Mia.shellabarger@sa.ucsb.edu



CDE Early Education & Support Services Application

Orfalea Family Children's Center, University Children's Center, UCSB

Instructions:

Applications for Early Education and Support Services are evaluated and ranked according to California Department of Education guidelines to determine if each family's income and need for child care qualify. All applications are carefully reviewed according to the level of course work each student has, the requested study time, schedule of employment, travel time, family income, as well as parental incapacitation. For parents who have been offered an immediate placement for their child, requested documentation as described below, will be needed as soon as possible. Parents will be contacted when their application has been approved so that all required paperwork can be signed. CDE services go into effect the day after the approved CDE contract has been signed. Services cannot be approved retroactively. In some cases, parents will need to pay for tuition for a few days before CDE services begin depending on how quickly child care is needed.

To expedite the review of your application, please submit documentation as described below:

_____ **Family Size Documentation:** To document your official family size, provide one or more copies of the following: birth certificate(s), medical records, school records, court order, etc. **All** children and adults who are counted in your family size must be documented; your relationship to your children as parent or official guardian is required.

_____ **All Student Parents/Guardians:** Official Course schedule from the Admissions Office (for UCSB, the Gold system printouts are acceptable) **Your name must appear on the schedule; days & times of all classes must be indicated).**

_____ **Graduate level students:** Letter on University department letterhead stating hours of need for research/dissertation work (independent study classes) that includes advisor's signature, phone #, and the days & times of child care needed (**i.e. Monday through Friday, 8:00 a.m. to 5:00 p.m.**)

_____ **Employment Verification:** Ask your employer to send an email with the details of your employment (see the following list) to: Mia.Shellabarger@sa.ucsb.edu, or provide an employment letter from your supervisor on corporate/department letterhead. The information required per CDE guidelines are: 1) your begin date, 2) gross monthly wages (faculty/teachers: verification should indicate if you are paid for 9 months or 12 months), 3) **daily work schedule (i.e. Monday through Friday, 8:00 a.m. to 4:00p.m)**, 4) nature of employment, 5) supervisor's name, 6) supervisor's phone number, 7) supervisor's signature and the name and address of your employer. (*Continued on next page*)

- _____ **Employer Release:** A written statement is required for all employed parents that authorizes *ECCEs*, *UCSB* to verify your current employment status, schedule and income. Your supervisor's name and phone number and email address must be included.

- _____ **Self Employed Parents/Guardians:** Letter of self-employment, copy of business license & income documentation (Additional documentation will be requested later).

- _____ **Paystub(s) required for employee's gross income for the prior 30 days.**

- _____ **Documentation of any other monthly income: TANF, Social security, parental support, child support etc.**

- _____ **Documentation of current residence for child(ren) : copy of utility bill, current lease (if dated recently) etc.**

After you have completed the attached application [pages 3,4] , you may email all documents to me at: Mia.Shellabarger@sa.ucsb.edu, or fax to: 805-893-4907, or mail or deliver in person to:

Mia Shellabarger
Early Childhood Care & Education Services, UCSB
MC 1060
University of California
Santa Barbara, CA 93106

APPLICATION FOR EARLY EDUCATION AND SUPPORT SERVICES

Preferred date of enrollment for Early Education and Support Services: _____ (Month/Year)

NAME(S) Parent(s) or Guardian:

Student /Staff _____ Home Phone _____ Day Phone _____
Community

2nd Parent / _____ Home Phone _____ Day Phone _____
Guardian

Address _____
Street City ZIPCODE

EMAIL ADDRESS: Parent 1) _____ **Parent 2)** _____

Child(ren)'s Name(s), Gender and Birthdate(s) for whom you are applying:

LAST FIRST BOY/ GIRL BIRTHDATE

LAST FIRST BOY/ GIRL BIRTHDATE

LAST FIRST BOY/ GIRL BIRTHDATE

OTHER FAMILY MEMBERS: Total Number in Family _____

For children include full name and date of birth: _____

1ST PARENT STATUS: UCSB SBCC Other **2nd PARENT STATUS:** UCSB SBCC Other

Undergrad Graduate

Undergrad Graduate

_____ # units enrolled _____

_____ # units enrolled _____

Perm #: _____ S.S.# _____

Perm #: _____ S.S.# _____

_____ Filing Fee _____ Unpaid Internship

_____ Filing Fee _____ Unpaid Internship

_____ GSI / GSR (circle) % of time _____

_____ GSI / GSR (circle) % of time _____

_____ Workstudy _____ #hrs / wk

_____ Workstudy _____ #hrs / wk

_____ Other employment _____ #hrs / wk.

Student at another campus _____

_____ Seeking Employment

_____ Employed _____
WHERE # UNITS

_____ Seeking Employment _____
WHERE #HRS/WK

