## Indiana Child Care Provider Holiday Request Form - 2008 only-

CCDF reimbursement can be made to all providers for up to six (6) days per calendar year for children enrolled full-time, when the center or home is closed due to a holiday.

- The facility must have a written policy to charge all consumers for days they are closed due • to a holiday.
- The child must have attendance at least one day in the 21 days preceding the holiday. •
- The attendance must be recorded in your POS device before the holiday occurs.
- You can only claim future dates as holidays (for example, requests received in February for • New Year's Day will not be honored).
- Do not select holidays for future years, only for 2008. •

Use the space below to record your selections.

Provider Name \_\_\_\_\_ Provider ID \_\_\_\_\_

SSN or EIN \_\_\_\_\_ County \_\_\_\_\_

2008 Holiday List	
(Please include the actual <b>date</b> you are requesting)	
1.	4.
2.	5.
3.	6.

Forms should be completed and returned by mail no later than November 1, 2007 to ensure January 1 selection.

## **Mailing Address**

ACS-CCDF HRF 101 West Ohio Street Suite 1700 Indpls IN 46204