

Waitlist Application School Readiness Child Care Scholarships

Thank you for your inquiry about school readiness child care scholarships administered through Early Learning Coalition of Pinellas County, Inc. (ELC) for children 0 through 9 years of age/completion of 3rd grade. The Waitlist helps ELC to identify and maintain a list of pre-qualified parents/guardians residing in Pinellas County who are in need of financial assistance to help pay for the cost of child care in order to work and/or attend school. There are several different sources of funding available in Pinellas County and in an effort to pre-determine the program that may meet your needs, ELC must have this application filled out completely.

If you are in a low-income family working, in school full-time, or combination of both, please look at the family and income chart below to see if you may qualify for placement on the school readiness child care scholarship waitlist. If you are a two parent family, both parents must be working, in school or a combination of both for a minimum of 20 hours per week each.

THE AMOUNTS LISTED BELOW ARE BASED ON YOUR COMBINED FAMILY SIZE AND TOTAL FAMILY GROSS (BEFORE TAXES) INCOME.

Family Size	Max Gross Family Income	Family Size	Max Gross Family Income	Family Size	Max Gross Family Income
2	\$22,065	5	\$39,255	8	\$56,445
3	\$27,795	6	\$44,985	9	\$62,175
4	\$33,525	7	\$50,715	10	\$67,905

Once ELC receives a **completed and signed** Waitlist Application, ELC will use it as preliminary qualification for placement on the ELC school readiness child care scholarship waitlist. When funding becomes available, ELC will notify parents/guardians on the waitlist by mail in the date order in which they were placed on the waitlist. When requested by ELC, parents/guardians will be required to bring in documentation and complete paperwork at one of ELC's intake offices to determine official eligibility to receive a child care scholarship within the time frame identified in the notice.

Your name will remain on the waiting list for **six (6) months** from the date ELC receives your completed application. You are required to contact ELC to update information as changes occur. If you do not contact ELC to confirm your current information or to provide updated information within six (6) months or if you are offered funding and refuse, your name will be **removed** from the Waitlist.

School readiness child care scholarships require a parent fee that is determined on a sliding fee scale, while other school readiness programs are available to assist children in low-income families with child care, educational or child developmental services at reduced or no cost. **Voluntary Prekindergarten Program** (administered through ELC) is free for eligible children 4 years of age. The **Pinellas County Head Start** program (727-547-5900) is free for eligible children 3-4 and **Early Head Start** for eligible children 0-3. The **Early Steps** program (727-767-4403) for children 0-3 and **FDLRS Gulfcoast Associate Center** program (727-462-1588) for children 3-5 provides free child developmental screenings/assessments. For more information and/or eligibility requirements on these programs, please contact the above listed agencies.

If you are receiving cash assistance (TANF), contact your WorkNet Pinellas representative and ask about a child care referral. **If you are under Protective Investigation, Protective Services or Foster Care**, contact your Investigator or Case Manager and ask about a child care referral.

Waitlist Applications can be completed online at www.elcpinellas.net or you may request one to be faxed, mailed or you can pick one up at any one of our ELC offices located at:

South County Pinellas County Health & Human Services 647 1st Avenue North St. Petersburg, FL 33701	Mid County Pinellas County Health Department 8751 Ulmerton Road Largo, FL 33771	Mid County Pinellas County Health & Human Services 2189 Cleveland Street Suite 226 Clearwater, FL 33765	North County Pinellas County Health Department 301 Disston Avenue Tarpon Springs, FL 34689
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ELC offices are open Mon-Fri from 8am to 5pm

If you have any questions regarding the Waitlist Process, Please Contact ELC Waitlist Staff at (727) 400-4402.

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SECTION A-PARENT/GUARDIAN INFORMATION (PLEASE PRINT)				
Parent/guardian Name: Last, First, MI		Date of Birth:	Race:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F
Address: (Current Residence)		Apt/Lot #:	City:	State: Zip Code:
Mailing Address: (If Different from Residence)		Apt/Lot #:	City:	State: Zip Code:
Home Phone Number:	Cell Phone Number:	Work Phone Number:		Other Contact Number: (Please Explain)
Current Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		Language Preferred: Level of Education: <input type="checkbox"/> No Degree <input type="checkbox"/> High School Diploma <input type="checkbox"/> G.E.D. <input type="checkbox"/> AA/AS Degree <input type="checkbox"/> BA/BS Degree or Higher		
Employment and/or School Information: You must be working a minimum of 20 hours per week or attending school full-time or a combination of work and school equaling a minimum of 20 hours per week to qualify for the waitlist. If a two parent home, then both parents must be working or in school or combination of both for a minimum of 20 hours per week each.				
Employer's Company Name:		Employer Phone Number:		Number of Hours Worked Per Week:
Name of School:		Purpose for Education: <input type="checkbox"/> Diploma <input type="checkbox"/> G.E.D. <input type="checkbox"/> AA/AS <input type="checkbox"/> BA/BS <input type="checkbox"/> Other _____		Number of Credit Hours:
Total Number of Persons in the Household: _____ (This includes the parent(s)/guardian(s) of child(ren) who live in the home and all other persons living within the residence)				
Please list below all persons in the household (adults and children not needing child care) and relation to the parent/guardian:				
Name Relation		Name Relation		
1.) _____.		4.) _____.		
2.) _____.		5.) _____.		
3.) _____.		6.) _____.		
SPOUSE/OTHER PARENT INFORMATION (ONLY IF THE SPOUSE/OTHER PARENT IS IN-HOME)				
Spouse/Other Parent Name: Last, First, MI		Date of Birth:	Race:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F
Employer's Company Name:		Employer Phone Number:		Number of Hours Worked Per Week:
Name of School:		Purpose for Education: <input type="checkbox"/> Diploma <input type="checkbox"/> G.E.D. <input type="checkbox"/> AA/AS <input type="checkbox"/> BA/BS <input type="checkbox"/> Other _____		Number of Credit Hours:

PLEASE COMPLETE SECTION B & C ON THE BACK AND THEN SIGN AND DATE



SECTION B-CHILD INFORMATION

List Information for Each Child 0 through 9 Years of Age/completed 3rd grade

Please check box for child(ren) needing child care funding	Child 1 <input type="checkbox"/>	Child 2 <input type="checkbox"/>	Child 3 <input type="checkbox"/>	Child 4 <input type="checkbox"/>	Child 5 <input type="checkbox"/>
Child's Last Name					
Child's First Name					
Child's DOB (need proof when funding becomes available)					
Your Relationship to Child					
Child's SS Number (Optional)					
Child's Race					
Child's Gender					
Is Child in Foster Care or under Protective Services?					
Current Child Care Location					
Does child have a Diagnosed Disability or a Developmental Concern?					
Is/are the child(ren) currently attending a Head Start Program?					

SECTION C-FAMILY AND HOUSEHOLD INCOME

Please check mark next to the type of income received, indicate who receives the income, write the GROSS amount (before taxes) and check how often it is received.

✓	Type of Income	Who Receives Income?	Gross Amount Received?	Frequency (Check how often you receive this income)
	Alimony			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Child Support			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Employment #1			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Employment #2			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Active Military or Reserves			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Pension/Retirement			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Social Security			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	SSI (Supplemental Disability) We may request statement from your Dr re: your disability			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Unemployment/Workman's Compensation			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	TANF Cash Assistance			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Housing Assistance			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually
	Other (Please Explain)			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually

Release: I hereby give authorization that any information received/obtained by ELC for School Readiness Child Care Wait List purposes can be shared for eligibility determination, fee determination, referral, community needs assessment and service delivery purposes among ELC School Readiness Collaborative Partners (Juvenile Welfare Board Children's Services Council of Pinellas, Pinellas County Head Start, FDLRS Gulfcoast Associate Center, and Early Steps Program).

The School Readiness Child Care Scholarship Program offers various choices of sites for licensed/legal child care within Pinellas County, including subcontracted, school based, faith based and informal/certificate voucher care arrangements. I understand that this is only an application and does not actually enroll my child in any listed program. Based on the program(s) that my family pre-qualifies for, I may be required to meet additional qualifications. I attest that the income and household information is true and complete and is an accurate account of my household circumstance. I further understand that I must report any income/address change **IMMEDIATELY** to ELC.

SIGNATURE OF PARENT/GUARDIAN: _____ **DATE:** _____