

UA Life & Work Connections
1125 N Vine Ave.
Tucson, AZ 85721-0155
Phone 520-621-4365
FAX 520-621-4474



2009/2010 Employee Child Care Voucher Program Enrollment Verification Form

(To Be Completed by the Child Care Provider: Please Print Legibly)

Child Care Provider _____

Address _____ Phone _____

City _____ Zip Code _____

Provider Social Security Number or Tax ID Number _____

Name of UA Employee _____			
I have used a second page or the back of this form to complete this section ___ Yes ___ No			
Child's Name _____	Age _____	Date of Birth _____	Child Care Fee _____
Child's Name _____	Age _____	Date of Birth _____	Child Care Fee _____
Child's Name _____	Age _____	Date of Birth _____	Child Care Fee _____
Child's Name _____	Age _____	Date of Birth _____	Child Care Fee _____
The above fee is <input type="checkbox"/> hourly <input type="checkbox"/> weekly <input type="checkbox"/> monthly and is considered a <input type="checkbox"/> full-time <input type="checkbox"/> part-time rate.			
I <input type="checkbox"/> charge <input type="checkbox"/> do not charge when the child is absent.			

Provider, by signing this form, you are indicating that you have reviewed and understand the content below:

1. The parent is solely responsible for contracting with you.
2. Child Care and Family Resources requires that the provider be one of the following: a DES certified or USDA certified family child care provider, a DES certified relative care provider, a DHS licensed center or certified group home or a program sponsored by The University of Arizona. Exceptions are permitted only in the case of a before and/or after school program or intercession program sponsored by a school district and child development programs (child care centers and family child care homes) with a valid Department of Defense (DoD) Certificate to Operate.
3. Child Care and Family Resources will contact you when the employee returns this enrollment form to confirm the child(ren)'s enrollment and fees.
4. The Employee Child Care Voucher Program is designed specifically to help employees pay for qualifying, work-related child care occurring in Arizona. Child care expenses accrued when the parent is not working at the University will not be reimbursed, and should be recorded separately.
5. You will be required to provide information regarding child care charges and the parent's payments. This office will provide the forms and it will be the parent's responsibility to bring them to you for completion.
6. It will be the parent's responsibility to submit completed forms by mail to UA Life & Work Connections' Child Care and Family Resources, 1125 N. Vine, Room 211. Tucson, AZ 85721 or by fax at 621-4474. Parents and providers may call 621-4365 or visit <http://lifework.arizona.edu> for more information.

Provider's Signature _____ Date _____