Application for
Child Care Services

Workforce Solutions of Central Texas
300 Cheyenne
Killeen, Texas 76542
(254) 200-2009
fax: (254) 200-2245

“Workforce Solutions of Central Texas is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.”
For individuals with speech or hearing impairment, dial 7-1-1 to access Relay Texas
Application for Child Care Services

Workforce Solutions of Central Texas
102 E. Central Ave Ste. 300
Temple, Texas 76502
(254) 742-4400
fax: (254) 774-9699

“Workforce Solutions of Central Texas is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.” For individuals with speech or hearing impairment, dial 7-1-1 to access Relay Texas
How to qualify for child care services

- You must reside in one of the following seven counties to apply for Child Care Services: Bell, Coryell, Hamilton, Lampasas, Milam, Mills, and San Saba
- Child Care Services provides care for children ages 0-12 or under the age of 19 for children with disabilities
- If you are a single parent household, you must be currently working and/or in job training or attending an educational program for a minimum of 25 hours or more per week.
  -or-
  If you are a two-parent household, you BOTH must be currently working and/or in job training or attending an educational program for a minimum of 50 total combined hours or more per week. Parents must participate a minimum of 15 hours per week.
- If you are attending an accredited educational institution you are required to maintain a 2.0 GPA per semester.
  * Other stipulations may apply. If you have questions contact your local Child Care Services office.
- Child Care Services requires cooperation with the Office of Attorney General to collect child support for all children in your household. If you do not currently have an open case for child support you must be willing to open one. You can open a child support case online at https://childsupport.oag.state.tx.us or visit their office located at 3009 Saulsbury Dr, Temple TX 76504.
- Child Care Services requires the use of the Child Care Automated Attendance System (CCAA) to report daily attendance and absences. The use of this card is MANDATORY. Parents who are reapplying for services and already have a card can use the same card at any child care center once they return to care. If you have any questions about the card please contact Child Care Services.
  * More information about the CCAA card is also available on the card form located in the application packet.
  o If you are an owner, assistant director, or director of the Licensed Child Care facility in which you are employed, you can apply for assistance with your child care; however your child(ren) CANNOT attend the facility where you are employed. You will have to choose an alternate provider.
  o If you are employed at a licensed, registered, or listed child care home, CCS will not reimburse your employer if they provide care for your child(ren) during the hours you work at the child care home.

Incomes that must be reported to Child Care Services include

- Total gross earning. These earnings include wages, salaries, commissions, tips, piece-rate payments, and cash bonuses earned.
- Net income from self-employment
- Pensions, annuities, life insurance, and retirement income, and early withdrawals from a 401 (k) plan not rolled over within 60 days of withdrawal. This includes Social Security pensions, veteran’s pensions and survivor’s benefits and any cash benefit paid to retirees or their survivors by a former employer, or by a union, either directly or through an insurance company. This also includes payments from annuities and life insurance.
- Taxable capital gains, dividends and interest. These earnings include capital gains from the sale of property and earning from dividends from stock holdings, and interest on savings or bonds.
- Rental income. This includes net income from rental of a house, homestead, store or other property, or rental income from borders or lodgers.
- Public assistance payments. These payments include TANF, refugee assistance, Social Security Disability insurance, Supplemental Security Income and general assistance.
- Income from estate and trust funds.
- Unemployment compensation.
- Workers’ compensation income, death benefit payments and other disability payments. These payments include compensation received periodically from private or public sources for on-the-job injuries.
- Spousal maintenance or alimony. This includes any payment made to the spouse or former spouse under a separation or divorce agreement.
- Child Support. These payments include court-ordered child support, any maintenance or allowance used for current living costs provided by parents to a minor child who is a student, or any informal child support cash payments made by an absent parent for the maintenance of a minor.
- Court settlements or judgments. This includes awards for exemplary or punitive damages, noneconomic damages, and compensation for lost wages or profits, if the court settlement or judgment clearly allocates damages among these categories.
- Lottery payments of $600.00 or greater.
If you are approved for Child Care Services

- You could be responsible for paying a portion of your child care fees each month
- Your portion of the child care fees is called the “Parent Share of Cost”
- Your parent share of cost amount is determined by a sliding fee scale based on family size and gross monthly income. Fees will be set at approximately 10% of the family’s gross monthly income for a lower income earner and up to a maximum of approximately 14% of a family’s gross monthly income for higher income earners
- Your parent share of cost becomes effective the first day CCS authorizes the child care and payment must be made to the child care provider in advance of care
- You must pay your parent share of cost even if your child is absent from care
- You will be given a Parent Share of Cost Agreement and you must pay the monthly fee amount to remain eligible for Child Care Services
- If you fail to pay your parent share of cost your child care services will be terminated and you will have to wait 60 days to reapply for assistance
- Some providers charge more than what CCS pays. It is your responsibility to talk to your child care provider about any additional fees they may charge. If the provider charges additional fees, you will be responsible for the fees in addition to your assigned parent share of cost. If you do not have a parent share of cost, you cannot be charged the difference between what CCS pays and what the provider’s rate is
- Full day care is more than six hours but cannot exceed 12 hours per day. Part day care is up to six hours per day

Read the provider’s policies carefully before you agree to place your child(ren) in care. The provider may have other policies that require additional monies from you. Not all providers have the same policies. If you do not like or cannot afford a provider’s fees, seek another provider before you sign an agreement

Helpful information about providers

- You have the right to choose a provider that best suits your needs. It is your responsibility to ensure the provider you have chosen has the space available for your child(ren). Please take time to visit potential providers prior to making your final child care choice
- We have provided you with the Texas Department of Family and Protective Services (DFPS) website to assist you in searching for a provider that fits your needs
- CCS will only allow you to transfer your child(ren) to a different provider two times per year, unless the child is in imminent danger or for reasons beyond your control
- Some providers exceed the minimum requirements set by licensing and therefore receive an increased reimbursement from CCS
  *A list of local providers can be found in the application packet for your use*

Who is eligible to care for your children

- A center or home licensed by the Texas Department of Family and Protective Services;
- A day camp licensed by the Texas Department of Health;
- A family home registered by the Texas Department of Family and Protective Services;
- A facility operated and monitored by the United States Military Services; or
- The child’s grandparent, the child’s great-grandparent, the child’s aunt, the child’s uncle, or the child’s sibling if the relative does not reside in the same household as the eligible child. Any provider must be at least 18 years of age (proof of residence will be required) and the individual needs to be listed with the Texas Department of Family and Protective Services
INSTRUCTIONS

Form 2050-A

Each Parent/Caregiver in the house will have to complete a separate form

Part A: All information is required. Please complete each line, and if it does not apply to you, enter N/A beside the line.
List everyone living in your household, their birthdates, Social Security numbers and their relationship to you. Please include your current address and phone number and any other contact number where we may reach you.

Part B: **Your current employer** must complete this section.

Part C: If you are attending school or training, the School/Training Verification section must be completed by a school official. You may receive child care for up to 4 years. You must maintain a minimum 2.0 GPA. Online classes count towards eligibility as long as they are from an accredited school. Restrictions may apply, so be sure to ask a CCS representative if your school or training will be considered for eligibility.

Part D: Sign and date.

Form 2043: Please sign and date the Release of Information Section. If you do not have an order for child support, please take this form to the Office of the Attorney General (OAG) in Temple. A map with important telephone and on-line information is attached. If you have an open child support case, please access the OAG website and print out the income verification and submit it with your application packet. If you are applying for child support assistance on the OAG website, once you complete the application, please print out a copy of the confirmation page and return it with the CCS application.

**Necessary information to submit with the application:**

- A copy of Social Security cards for each family member (This is voluntary, but if you choose not to submit SSN cards, you must submit other forms of acceptable documentation. The list of acceptable documents is attached)
- A copy of birth certificate for each child
- Four (4) most recent pay stubs
- Latest end of month LES if military
- Copy of award letter or other proof of SSI, GI Bill, or VA payments if applicable
- Current class schedule, transcript and Degree or Training Plan
- Proof of child support payments; proof of an open child support case with the Office of Attorney General (OAG); copy of court order for child support; or personal arrangement for child support agreement
- A complete copy of your divorce decree or petition for divorce
- If separated from spouse: proof of separate households for both – rental lease or mortgage and a utility bill
- If you are separated and your spouse is an active duty military member – a letter from the company commander verifying the military member’s living status. The separation must not be due to geographical reasons
- Two forms of documentation verifying you reside in our service delivery area
- Verification of position (Only if employed by a daycare)
Acceptable Documentation for Verifying Identity

- U.S. Passport
- State driver’s license with a photograph or other identifying information such as name, age, and gender
- Government-issued identification (ID) card with a photograph or other identifying information such as name, age, and gender
- Government-issued school ID card with a photograph
- U.S. military card or draft record
- Birth certificate
- Hospital record of birth
- Military dependent’s ID card
- Native American Tribal document
- U.S. Coast Guard Merchant Mariner ID card
- Certificate of Degree of Indian Blood or other U.S. American Indian/Alaskan Native and Tribal document with a photograph or other personal identifying information
- Adoption papers or records
- Government-issued employee ID with photograph
- Signed application for Medicaid—signature of an authorized representative acting on the individual’s behalf is acceptable
- Health care admission statement
- Three or more corroborating documents (examples include, but are not limited to, marriage licenses, divorce decrees, or high school diplomas)
- Clinic, doctor, or hospital records for children under age 16
- School records, which can include nursery or day care records, for children under age 16
PARENT AGREEMENT TO REPORT CHILD CARE ATTENDANCE

Parent/Caretaker: __________________________________________________
(print name)

I understand that my child’s care may be terminated without prior notice if my child is absent for five days in a row without contacting the child care provider or the child care contractor, and care cannot continue during my appeal of the termination.

As a requirement for receiving child care services, I agree to the following:
• I understand that use of the Child Care Attendance Automation card (attendance card) is mandatory.

• I must use the attendance card to report attendance and absences.

• If I do not report attendance or absences using the attendance card:
  ➢ my child care services may be terminated; and
  ➢ I may be responsible for paying my provider.

• I must report to the child care contractor when my attempt to record attendance is denied or rejected and cannot be corrected at the provider site. If I do not report to the contractor, the failure to report attendance may result in an absence or I may be responsible for paying my provider.

• I can designate up to three individuals as secondary cardholders to report attendance and absences on my behalf.

• The secondary cardholder must be at least 16 years old, unless the individual is the child’s parent.

• I must not designate the owner, assistant director, or director of the child care facility as a secondary cardholder.

• I am responsible for any misuse of the attendance card by any secondary cardholder.

• I am responsible for informing any secondary cardholders of these requirements and their responsibility for using the attendance card.

I also understand that my child care services can be terminated if I or the secondary cardholder:
• gives the attendance card to someone else—including the child care provider; or
• gives the personal identification number to someone else.

I acknowledge that I have read and agreed to this parent agreement, and all of my questions about this agreement have been answered.

Parent Signature: _________________________________________________

Date: __________________________

The Texas Workforce Commission prosecutes fraud to ensure that child care funds are maximized for qualified families.
To report suspected fraud, call the fraud hotline at (800) 252-3642.
WORKFORCE SOLUTIONS OF CENTRAL TEXAS
VERIFICATION FORM (Child Care)

PLEASE COMPLETE THE INFORMATION REQUESTED BELOW. FAILURE TO DO SO WILL DELAY YOUR DETERMINATION FOR ELIGIBILITY AND ASSISTANCE MAY BE DISCONTINUED OR DENIED. PLEASE REMEMBER TO SIGN PART D.
This form must be received or postmarked by ______________.

PART A – HOUSEHOLD INFORMATION

<table>
<thead>
<tr>
<th>Name (Last, First, Middle – Please Print)</th>
<th>Social Security #</th>
<th>D.O.B.</th>
<th>Relationship</th>
<th>Race</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td>Self (You)</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>Spouse/Significant Other</td>
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</tbody>
</table>

Physical Address: ________________________________________  City/ST ___________ Zip ___________

Mailing Address: ________________________________________  City/ST ___________ Zip _______

Main Telephone #: ______________________  Alternate Phone #: ____________________  E-mail address: ________________________

Please circle one of the following:  Single  Married  Separated  Divorced  Widowed  Spouse Incarcerated

Are you a:  Veteran (DD214 required) ______ or Foster Youth ______ or Teen Parent ______? If you or anyone in your household receives money from the following, please enter the AMOUNT and *submit written proof.

$__________ TANF  $__________ UNEMPLOYMENT BENEFITS *

$__________ FOOD STAMPS/SNAP  $__________ CHILD SUPPORT *

$__________ S.S.I. or SOCIAL SECURITY *  $__________ VETERANS BENEFITS/RETIREMENT *

$__________ OTHER *  $__________ MONTHLY MEDICAL EXPENSES for a child with disabilities *

PART B – EMPLOYMENT / WAGE VERIFICATION

Your current employer must complete this section and you must submit your FOUR MOST RECENT PAY STUBS or current leave and earning statement (LES) with this form. If you are self-employed, please see the CCS self-employment form. This form must be completed for each place of employment.

Employee’s Name: _______________________________________  Place of Employment: ____________________________

Date of Employment: _______________  Average Hours Worked Per Week: ___________  Hourly Pay Rate: $__________

How Often Paid?  Weekly  Every other Week  Twice a Month  Monthly  (Please Circle One)

If your employee is paid a monthly or yearly salary, please indicate amount: $__________________________

If your employee works overtime, please give average hours per month: _______________  Hourly Overtime Rate: $__________

If your employee receives any other income, please list (Example: Tips, Commission, Etc…) $ __________________________

Signature of Person Providing Information  Title  Date

Business Address  Telephone Number

July, 2014
PART C – SCHOOL / TRAINING VERIFICATION
(Parent must provide a copy of current enrollment/class schedule, transcript/semester GPA and degree plan)

This section must be completed by your school official:

Student’s (Parent) Name: ________________________________________________________________

School/Training Institution: ______________________________________________________________

Address of School/Training Institution: ______________________________________________________

Telephone Number: __________________________ Degree Plan/Training Plan: __________________________

On-Campus: Total Number of Hours / Semester Hours Currently Enrolled: __________ Total Lab Hours Required: __________

On-Line Classes: Total Number of Hours / Semester Hours Currently Enrolled: __________

Hours / Days of Scheduled Classes: __________________________ Anticipated Graduation/Completion Date: __________

FINANCIAL AID:

Pell Grant Amount: $__________________________ Pell Grant Balance: $__________________________

Veterans Benefits Amount: $__________________________

Please List Other Loan Types and Amounts: $__________________________

Signature of Person Providing Enrollment Information  Title  Date

Signature of Person Providing Financial Aid Information  Title  Date

PART D – PARENT SIGNATURE

The parent or caretaker of the child who is receiving Child Care Services must complete this section.

I certify that the above information provided on this form is true and accurate to the best of my knowledge. I understand that giving false information may constitute fraud and could result in a penalty of waiting 60 days to reapply for services, prosecution and / or the repayment of money for services for which I was not entitled. I release any and all parties providing information to the Child Care Contractor and WSCT regarding my employment, schooling or training from any liability associated with the release of such information. I understand that the information I provide is for determining my eligibility for childcare services.

Parent / Caretaker Signature  Date
# WORKFORCE SOLUTIONS OF CENTRAL TEXAS BOARD
## PATERNITY/CHILD SUPPORT VERIFICATION

**Parent Permission for Release of Information**

I hereby give my permission to release the information requested on this form.

Signed: __________________________________________________

Date/Fecha_______________________

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<table>
<thead>
<tr>
<th>Custodial Parent Name</th>
<th>Child’s Name</th>
<th>TWIST ID (office use only)</th>
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</tr>
<tr>
<td>Custodial Parent Social Security Number</td>
<td>Child’s Social Security Number</td>
<td>Name of Non-Custodial Parent/SSN</td>
</tr>
<tr>
<td>Work No. of Custodial Parent</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address of Custodial Parent</th>
<th>Telephone No. of Custodial Parent</th>
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<tbody>
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</tbody>
</table>

Do you have a personal child support agreement with the non-custodial parent?  
- [ ] Yes  
- [ ] No

Do you have a court order for child support?  
- [ ] Yes  
- [ ] No

OAG Case Number __________________________ or Court Cause Number __________________________

Order was filed through __________________________ county/state.

Take a copy of the divorce decree/court order to the Office of the Attorney General (for enforcement purposes).

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**Please include income verification printout.**

How to print a copy of your child support income verification

Got to: [childsupport.oag.state.tx.us](https://childsupport.oag.state.tx.us)

- Click on “Custodial Parent log in”
- Enter your CIN and enter Your PIN (Last 4 numbers of your Social Security number)
- Click on “log In”
- Click on “Income verification” (Left Side)
- Select “Generate Report – Child Care”
- Click on Continue
- HOLD DOWN CONTROL (CTRL) KEY on KEY BOARD. **DO NOT** RELEASE THE CTRL KEY UNTIL THE REPORT PRINTS
- CLICK “GENERATE FORM” file download for Adobe Acrobat Will open
- Click “Open”
- CONTINUE TO HOLD CONTROL (CTRL) KEY
- When Adobe Reader shows on tool bar, Click that. CONTINUE TO HOLD CONTROL (CTRL) KEY
- Minimize OAG page.
- INCOME VERIFICATION SHOULD SHOW. You may now release the CTRL key and print the document.

If you need assistance printing the income verification please bring your CIN number to the CCS office and we can help you. You must be present while we assist you.
Child Support Local Field Office:

OFFICE 704 - Temple

Physical Address:
3009 Saulsbury Drive
Temple, TX 76504-2273

Mailing Address:
P.O. Box 5229
Temple, TX 76505-5229

Main Number: (254)778-1841 or (800)252-8014
FAX: (254)771-2791

Web Site: http://www.oag.state.tx.us

*Counties served by this office: Bell, Coryell, Lampasas, Milam, & San Saba

FROM BELTON, TX

I-35 N/US-81 N.
Exit 301
Take the TX-53 W exit toward FM-2305

Turn LEFT onto TX-53

Turn RIGHT onto GUY DR.

Turn LEFT onto SAULSBURY DR.
End at 3009 Saulsbury Dr
Temple, TX 76504-2273, US
Child Support Local Field Office:

Unit 704/723 Killeen field office

Physical Address:
2300 E. Rancier Ave Suite 101
Killeen TX 76543

Main Number: (800)252-8014
Hours: 8:00 am to 5:00 pm/ Monday-Friday

Web Site: http://www.oag.state.tx.us

*Counties served by this office: Bell, Coryell, Lampasas, Milam, & San Saba

1. Start out going east on Cheyenne Dr toward W Central Texas Expy. 0.06 mi
2. Turn right onto W Central Texas Expy. 0.2 mi
3. Turn slight left onto W Jasper Dr. 0.6 mi
4. Turn left onto Trimmier Rd. 0.7 mi
5. Turn right onto Terrace Dr. 0.6 mi
6. Turn left onto S W S Young Dr. 1.3 mi
7. Turn right onto E Rancier Ave / FM-439. 0.05 mi
8. 2300 E RANCHER AVE is on the right.

July, 2014
**How to Search for Day Care Providers**

**www.txchildcaresearch.org**

**Search for Child Care Center or Home**

This can include home or center based Child Care

More Info on Child Care Center or Home types

**STEP 1:**

Click here

Search for Child Care Center or Home

Search for Child-Care Operation

Enter additional search criteria to narrow search results.

**Operation Type:**

- No Preference

**Issuance Type:**

- No Preference

**Operation Name:**

**Ages Served:**

- Infant (0 - 17 months)
- Toddler (18 months - 2 yrs)
- Preschool (3 yrs - 4 yrs)
- School (5 yrs and older)

**Address:**

**City:**

**County:**

Choose

**Zip Code(s):**

**STEP 2:**

Enter one or more search criteria.

To widen your search enter ONLY City and County

**STEP 3:**

Click Search

**STEP 4:**

Click on Center name for more information

Child Care Services will place children in a Licensed Child Care Center, Licensed Child Care Home, or Registered Child Care Home. Placement in a Listed Family Home will be authorized on a case-by-case basis.

**Child Care Licensing Offices**

**Killeen**

254-526-9011

**Belton**

254-939-3561

Updated: 10/01/2010