# Eagle Valley Child Care Association Sliding Scale Application

## **Parent Information**

Parent/Guardian First Name	1 Last Na	mo	Address		Phone Number
riist waine	Lastina	inie	Address		I none Number
Employer		Position		# Hours Worked Per Week	
Parent/Guardian	<u>2</u>	<u> </u>			
First Name	Last Na	ime	Address		Phone Number
Employer		Position		# Hours Worked Per Week/Work Schedule	
If either/both par Name of	eparated I ent(s) are remainstrates: Step-Parent:	Divorced arried:	Single		1
If parents are sep	•				en) live?
What are the term	ns of the divor	ce/separation	n with regard to	child sup	port and/or alimony

#### **Family Information**

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Child's Name	Date of Birth	Classroom Assignment at EVCCA Early Childhood Programs	# of Days Attended at EVCCA Early Childhood Programs

### **Family Financial Income:**

Please attach a copy of your W-2 forms for the most recent tax year. Please also attach a copy of your Federal Income Tax Return (Form 1040) for the most recent year in which you have filed. Applications without the additional documentation will not be reviewed.

Please describe any circumstances that the EVCCA Board should be aware of in terms of your employment (e.g., seasonal, reduced hours, etc).

If parent(s) are unemployed, what are your intentions/prospects with regard to employment?

#### Annual GROSS Earnings:

	2011 Earnings	2012 Earnings	Projected 2013 Earnings
Parent 1 Income			
Parent 2 Income			
Other Income (specify**)			
Total			

<sup>\*\*</sup> Other income includes interest, dividends, self-employment, alimony, child support, social security, trust fund income, etc.)

Family Assets					
Please answer the following q	uestions:				
Total value of Savings Account	Total value of Savings Accounts				
Total value of Stocks/Bonds					
Do you own your					
home/apartment/property?					
If own, what is the value of you	our residence?				
Do you own/rent a second hor					
If own, what is the value of you	our 2 <sup>nd</sup> home?				
Ţ	Are there any trust accounts for either				
parents or children? Please pr					
additional information if appli	icable.				
Do you own an automobile?					
Do you own a recreational vel	hicle or boat?				
Family Expenses					
Please outline your families' e	expenses below	:			
Expense	Mon	thly	Annual		
Rent/Mortgage					
Rent/Mortgage Utilities					
2 5					
Utilities					
Utilities Loan Payments					
Utilities Loan Payments (auto & credit cards)					
Utilities Loan Payments (auto & credit cards) Educational Expenses					
Utilities Loan Payments (auto & credit cards) Educational Expenses (after school care, summer					
Utilities Loan Payments (auto & credit cards) Educational Expenses (after school care, summer camp, child care for ALL					
Utilities Loan Payments (auto & credit cards) Educational Expenses (after school care, summer camp, child care for ALL children in your family)					
Utilities Loan Payments (auto & credit cards) Educational Expenses (after school care, summer camp, child care for ALL children in your family)					
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Signature:

Date: \_\_\_\_\_