

DPHHS-HCS/CC-015  
 (Rev. 01/11)

Best Beginnings  
 Child Care Scholarship Program

**CHILD CARE  
 SERVICE PLAN**

CHILD CARE ASSISTANCE STAFF ONLY	
CASE / CASE EVENT NUMBER	
HEAD OF HOUSEHOLD NAME	
ELIGIBILITY BEGIN DATE	ELIGIBILITY END DATE
ELIGIBILITY DETERMINATION DATE	R&R DATE STAMP
CASE EVENT WORKER NAME	

**INSTRUCTIONS**

When you select a child care provider, the Child Care Resource and Referral (CCR&R) agency needs the information below to complete the child care certification plan.

- Use a separate form for each child care provider.
- If you change providers, submit a new form before, or within one (1) business day to maintain a child care scholarship.

Payment is not issued until your child care certification plan is complete. You, and your provider, will receive a copy of the certification plan in the mail. The certification shows the period of eligibility. If your family's circumstances change, notify the CCR&R within 10 days. A new certification plan may be issued.

***This is not an application for a child care scholarship. This is not a contract. This information is used only to arrange for a child care scholarship. The parent and provider may contract for services in a separate agreement.***

**HEAD OF HOUSEHOLD INFORMATION**

HEAD OF HOUSEHOLD NAME	PHONE NUMBER
ADDRESS	

**PROVIDER INFORMATION**

***A provider must have a current payment (PV) number. A scholarship payment will not be made if the provider number expires. All rate changes need to be reported in writing to your local Resource & Referral before the change, and will not take effect until the 1<sup>st</sup> of the month following the change.***

Is this the only child care provider for your family?  Yes  No  
 If no, this is my  Primary Provider  Secondary Provider  Backup Provider

PROVIDER'S NAME	PROVIDERS NUMBER <b>PV</b>
PROVIDER'S ADDRESS	PROVIDER'S TELEPHONE NUMBER
RATES FOR 0-24 MONTH-OLDS (INFANT)	RATES FOR AGE 2+ (CHILD)
\$ /day    \$ /hr	\$ /day    \$ /hr
PROVIDER'S TAX ID NUMBER	

**Type of Child Care Setting:**

**Certified Facility**

- LCI** - Legally Certified In-home Provider  
 **LCP** - Legally Certified Provider

**Licensed or Registered Facility**

- Family** Child Care Home (LRFH)     Child Care **Center** (LRC)  
 **Group** Child Care Home (LRGH)

CHILD #1	Child's Name:			Provider Name:		Provider's ID <b>PV</b>	Start Date
	Is this child related to the provider? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, relationship			Is this the only child care provider for this child? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, this is this child's <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Backup			
	HOURS AND DAYS CHILD CARE IS PROVIDED						
	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day
	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day
	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day

CHILD #2	Child's Name:			Provider Name:		Provider's ID <b>PV</b>	Start Date
	Is this child related to the provider? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, relationship			Is this the only child care provider for this child? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, this is this child's <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Backup			
	HOURS AND DAYS CHILD CARE IS PROVIDED						
	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day
	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day
	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm	am/pm to am/pm
	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day	Hrs per day