

Parent/Caretaker: _____

PARENT ACKNOWLEDGMENT OF REQUIREMENTS

As a requirement for receiving child care services, I understand and agree to the following:

- I must be actively working, in school, or in a training program at least 25 hours per week (or 50 hours a week in a two-parent household) in order to receive child care assistance. If I have any changes in my job, training, education I will report this change within 14 days or sooner to CCS.
- If my address, email, phone changes I must report this change to CCS. I understand if I do not report these changes it may cause a delay or interruption in my services. To avoid missing communication from CCS, I will ensure I report my changes to CCS within 14 days or sooner.
- If I have a change to my family size or household income I must report this change to CCS within 14 days or sooner.
- If I do not report changes to CCS when I am supposed to, I may be responsible for paying back CCS for all the child care payments made while I was not eligible.

I understand and agree to the following Parent Share of Cost requirements:

- I must pay my child care provider in advance (by the 3rd day of the month), before receiving child care.
- If I am having difficulty in paying my parent share of cost I will contact CCS.
- I understand if fail to pay my parent share of cost I may be terminated and I cannot reapply for 60 calendar days.

I understand and agree to the following Attendance Reporting requirements:

- I will ensure that my child attends child care on a regular basis.
- I am responsible for contacting CCS and my child care provider in advance (2 weeks) about changes in my child care arrangements or if I no longer require child care assistance.
- I understand that if my child does not meet attendance standards child care may result in suspension of care.
- I understand that if my child receives eight provider reports of 5 consecutive absences and exceeds more than (40) unexplained absences at any time during my 12-month eligibility period, CCS will discontinue child care services and I will be unable to reapply for 60 calendar days.
- I understand that absences due to a child's documented chronic illness, disability, or court ordered visitation are not counted towards the 40 absences per year allowed.

I have the following rights:

- Receive written notification at least 15 calendar days before termination of child care services.
- Be informed of my right to appeal, including the right to continue care during appeal and the potential for repayment if the appeal is rendered against me.

I ACKNOWLEDGE THAT I HAVE READ AND AGREED TO THE REQUIREMENTS STATED ABOVE AND THAT I RECEIVED A PARENT HANDBOOK AND ALL MY QUESTIONS HAVE BEEN ANSWERED. I UNDERSTAND THAT A PERSON WHO OBTAINS OR ATTEMPTS TO OBTAIN, BY FRAUDULENT MEANS, SERVICES TO WHICH A PERSON IS NOT ENTITLED MAY BE PROSECUTED UNDER APPLICABLE STATE AND FEDERAL LAWS.

Parent Signature: _____ **Date:** _____

Equal Opportunity Employer/Program; Auxiliary aids and services are available upon request to individuals with disabilities. Relay Texas: 1-800-735-2989 (TTY) / 711 (Voice). This service is funded in whole or in part by federal funds. More detailed information is located on the Boards website at <http://www.workforcesystem.org/107/Public-Information>
Este documento contiene información importante sobre los requisitos, los derechos, las determinaciones y las responsabilidades del acceso a los servicios del sistema de la fuerza laboral. Hay disponibles servicios de idioma, incluida la interpretación y la traducción de documentos, sin ningún costo y a solicitud

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.