

Please complete, sign and return

QUALIFIED CANDIDATES. BETTER JOBS. NO CHARGE.

Customer Awareness Form

Parent/Guardian (print name): _____ TWIST ID #: _____

Daytime phone number where you can be reached: _____

IMPORTANT: An attempt will be made to contact you by phone to review this information with you verbally.

Work/Training/Education:

1. I understand that I am able to receive child care so that I can work, attend educational classes and/or job training classes. I must be participating in one of the above activities a minimum of at least 25 hours per week for a single parent or 50 hours per week combined for a 2 parent household. If I am no longer working, no longer in school, or no longer in job training classes, or if any of these change, I will notify you within 14 calendar days of the change.

Family Income:

2. I understand that my eligibility for child care is based on my family’s gross monthly income and family size. If my family’s income goes above 85%SMI (see chart below) or my family size changes, I will notify you within 14 calendar days of the change.

Maximum Income Eligibility for Child Care Services October 1, 2018-September 30, 2019				
Family Size	Weekly	Bi-Weekly	Bi-Monthly	Monthly
2	\$ 833	\$1,666	\$1,804	\$ 3,607
3	\$ 1,029	\$2,058	\$2,228	\$ 4,456
4	\$ 1,225	\$2,450	\$2,653	\$ 5,305
5	\$ 1,421	\$2,842	\$3,077	\$ 6,154
6	\$ 1,617	\$3,235	\$3,502	\$ 7,003

3. Failure to report the above changes could result in fact-finding for suspected fraud, and you may have to repay the amount improperly paid on your behalf.

False Information:

4. I understand that if I provide false information to make myself appear eligible for child care services this could result in fact-finding for suspected fraud, and you may have to repay the amount improperly paid on your behalf. Criminal charges may also be filed against me with a local prosecuting authority.

Eligibility Validation:

5. I understand the information I provide to determine my eligibility is subject to validation through cross-checks against state and federal databases and that I may be asked to participate in face-to-face interviews and provide original documents to verify my identity and eligibility for child care services.

I understand that it is my responsibility to report true and correct information to child care services within 14 calendar days. All my questions about reporting eligibility changes were answered before/when I signed this form.

Parent/Guardian Signature: _____ Date: _____