# PCC Child Care Subsidy Information

There are currently three subsidy grants available:

## Student Activity Fee (SAF) Grant:
Provided at Sylvania, Cascade, Southeast and Rock Creek through Student Activity Fee funding:
1. Any state licensed Child Care Center or Family Child Care home.
2. Full-time and part-time students accepted. Apply at the campus where student takes most classes.
3. PELL eligible through Financial Aid (low income).

## Child Care Access Means Parents in School (CCAMPIS) Grant:
Provided at Sylvania Child Development Center, Rock Creek Child Care Center, Precious Teddies near Cascade Campus, and St. Anthony’s YMCA near Southeast Campus.
1. Students who are half-time or more can be considered.
2. Low income is still required: PELL grant eligible. Preference may be given to students who are eligible for full PELL grants.

## Portland Children’s Investment Fund (PCIF) Grant:
Only available to Portland residents, and only for use at the Sylvania Child Development Center, only for evening and Saturday care.
1. Students who are half-time or more can be considered.
2. Low income is still required: PELL grant eligible. Preference may be given to students who are eligible for full PELL grants.

To Apply:
1. Fill out an application (available on all campuses)
2. For the CCAMPIS be sure that there is space for your child(ren) at the designated center(s).
3. Your information will be verified to determine eligibility
4. Waiting lists generally exist. You will be notified when your name comes up on the waiting list.

** All grants require students maintain academic & Financial Aid eligibility.
** All grants are included, as a resource, when your Financial Aid is calculated.

### Need more information?
- **Sylvania:** Maki Yoshinaga, maki.yoshinaga@pcc.edu, 971-722-4651
- **Cascade:** Debra Porta, debra.porta@pcc.edu 971-722-5575
- **Rock Creek:** Kristin Martin, kristen.martin1@pcc.edu, 971-722-7448
- **Southeast:** Naho Katagiri, childcare.se@pcc.edu, 971-722-6053

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Eligibility

1. Student must be enrolled and Pell-eligible for financial aid.

2. Student must meet all college academic standards and progress policies to remain eligible.

3. Student already holding four-year or graduate degrees are not eligible due to limited funds.

4. Student who have received the reimbursement subsidy in prior years have priority over new, qualifying applicants.

5. The student’s child care must be received from a state-licensed provider. This means they have completed the appropriate training required by the state.

6. Subsidies will not be given to those students already receiving assistance from another source.
Subsidy Terms

1. Subsidies are for out-of-pocket childcare costs accrued while attending PCC classes on Southeast campus.

2. Children will be subsidized from infancy to 5 at full-time subsidy, 6 to 11 at part-time subsidy, based on student-parent full-time or part-time enrollment status. Assistance provided will pay for no more than 50% of a parent’s childcare costs. The term “childcare cost” does not include tuition for school-age children at private or immersion schools.

3. No subsidies will be used when a public or private school alternative is available.

4. Student may apply for and receive the subsidy up to three terms per academic year (excluding summer term). Student must apply each term to receive subsidy. Applications are available the first day of each term.

5. If student falls into Academic Warning status based on Financial Aid guidelines, the student will have one term to return to Good Standing. The student will need to see an advisor and submit a new academic plan. If the student fails to return to Good Standing, they will no longer be eligible for the subsidy.

Reimbursement Process

1. Student-parent completes and submits to ASPCC the following: Please make sure that each of the required items below is included when returning your application. Missing items may disqualify your application from being processed.

☐ a) Subsidy Application form (one page)
☐ b) Student-Parent Subsidy Agreement form (one page)
☐ c) Copies of their children’s birth certificates
☐ d) Child Care Provider receipt form
☐ e) All receipts, as requested by PCC, from providers to verify charges—Childcare provider called for verification
☐ f) Official Grad plan copy from PCC Advising

2. Amount of SAF subsidy is based upon the following for full-time students (12 credits or more) for a child 5 years and younger:
   - 1 child $450 per term
   - 2 children $900 per term
   - 3+ children $1,350 per term (max)

   - Part-time students (6-11 credits) will receive ½ of the above numbers. *See Subsidy Terms above for children 6 years and older.
   - The maximum reimbursement amount possible, for a full-time student is $900 per term.
   - If the majority of a student’s classes are Distance Learning Courses, the student should apply for the SAF Childcare subsidy through the Sylvania campus.

4. The ASPCC Office is responsible for administration of funds.
a) In the case of an over-payment, or if a student does not complete the required credits, the student may be responsible for reimbursing the program directly.

b) One subsidy **disbursement** will be issued per term, around the **5th week** of the term. Subsidy will be disbursed in the same form of payment as student’s financial aid disbursement. Again, a student must reapply each term to qualify for reimbursement.

*The childcare advocate will do a midterm check to verify student is maintaining eligibility. This means the student’s registration and provider status will be re-verified. If the student drops below stated registration (the registration status provided at the beginning of the term) or their child stops attending the stated childcare facility, the student will be required to register for remaining classes, find a new provider, or work with advocate to remedy situation.*
Student-Parent Subsidy Grant Agreement

By signing this form I agree to the following:

1. Dropping credits after the first week of the term will disqualify the student from the Child Care Subsidy program.

2. Student must not hold a four-year or graduate degree to receive funding.

3. Student’s childcare must be received from a currently state licensed provider. This means they have completed the appropriate training required by the state. Must include provider’s license number in order to be considered.

4. Students must provide a statement/receipt from licensed child care provider with application.

5. Grants will not be given to those students already receiving school childcare assistance from another source. Work childcare assistance will be determined on a case by case basis.

6. The PCC Financial Aid Office has permission to release information to the Child Care Subsidy program.

7. Student’s Childcare Provider has permission to release information to the Child Care Subsidy program.

8. Providing inaccurate information may result in disqualification from the subsidy program.

9. Subsidies are part of Financial Aid, and are counted as a resource.

10. Subsidy amounts may change at any time, pending fund availability.

11. It is student’s responsibility to report any changes in address or childcare situation to the Southeast Student Leadership Office.

12. Student has complete responsibility in choosing a child care provider. PCC shall be held harmless in any dispute and/or litigation.

13. Student shall remain in financial aid and academic good standing.

14. Copies of birth certificates must be included for the children in order to receive funding.

15. A copy of an academic plan made by the student and a PCC advisor must be submitted in order to receive funding.

16. Students must be enrolled in a minimum of 6 credits at PCC, with the majority of their credits taken on Southeast Campus. (i.e. if a student is enrolled in 6 credits and 3-4 of those credits are at Southeast Campus).

I agree to meet the terms of the participation agreement as listed above. I understand that failure to do so may result in losing the child care grant and could result in a violation of the Student Code of Conduct.

___________________________________  ________________
Signature                                      Date

Revised 1/4/2017
STUDENT-PARENT CHILDCARE SUBSIDY APPLICATION
(Please type or print clearly)

STUDENT G#________________________

PERSONAL INFORMATION
1. Student Name: ____________________________________________________________
2. Current Address: __________________________________________________________
   City: __________________ State: ______ Zip Code: __________
3. Phone: Primary __________________ Secondary __________________
4. PCC E-mail Address: ______________________________________________________
   Please provide information about children needing childcare while you are in classes.
   The PCC subsidy does not cover work-related childcare costs.
5. Child(ren): Name __________________ Date of birth ___________
   Name __________________ Date of birth ___________
   Name __________________ Date of birth ___________
6. Are you a member/veteran of the U.S. Armed Forces, or the child/spouse of a
   member/veteran of the U.S. Armed Forces? □ Yes □ No
7. Race/Ethnicity: □ American Indian/Alaska Native □ Asian □ Black or African-American
   □ Hispanic or Latino □ Hawaiian or other Pacific Islander □ Caucasian/white
8. Pell Grant Status: □ Receiving Pell Grant □ Eligible, but not receiving Pell Grant
9. Are you currently employed? □ Yes □ No
   If yes, how many hours a week do you work?: _____ If yes, where?_______________

COLLEGE INFORMATION
7. Which Campus do you attend most? □ Sylvania □ Cascade □ Rock Creek □ Southeast
8. Are you registered for full time □ Part time □: How many credits? _________
9. Do you need child care for (check all that apply): □ Fall □ Winter □ Spring

CHILD CARE PROVIDER/ASSISTANCE INFORMATION
Answers to these questions do not necessarily disqualify you from the subsidy program.
10. Who currently takes care of your child(ren)? □ Self □ Family member □ Friend/neighbor
    □ Family Day Care provider □ Day Care Center □ Other ______________________
11. Do you receive subsidized child care from another agency? □ Yes □ No

Please return form to:
Portland Community College – Southeast
MTH 152
2305 SE 82nd Ave.
Portland, OR 97216

Revised 1/4/2017
CHILD CARE PROVIDER RECEIPT FORM
(Please type or print clearly – To be completed by Provider)

CHILD CARE CENTER INFORMATION

1. Name of Organization: __________________________________________________________

2. Name of Owner/Supervisor: ____________________________________________________

3. Current Address: ______________________________________________________________
   City: ____________________ State: _______ Zip Code: __________

4. Phone: Primary ____________________ Secondary ____________________

5. E-mail Address: ________________________________________________________________

6. Parent/Guardian Name: ________________________________________________________

7. Average total rate you charge the parent/guardian per month: $ ___________________

8. Provider State License Number**: _____________________________________________
   ** In order for students to receive the grant; we require that providers be licensed by the
   state. (This number is provided by the state. The license number is two letters followed by
   six numbers. For example: CFXXXXXX, RFXXXXXX, RAXXXXXX.) Please know this
   number will be checked and confirmed by ASPCC.

9. Name of the child or children in your care:
   1. ________________________________________________________________
   2. ________________________________________________________________
   3. ________________________________________________________________

By signing below, I agree that the information I’ve provided above is correct. Additionally, I
acknowledge that this funding provided by ASPCC is a subsidy for student-parents, and that any
financial arrangement made between Child Care Center and Student Parent is only between both
parties. Portland Community College is held harmless from any financial responsibilities to the
Center.

Provider Signature: _________________________________         Date: _____________________