

PARENT/PROVIDER CHANGE FORM

5101: 2-16-35 R

A caretaker receiving child care benefits shall be required to report to the MCDJFS Child Care Case Manager any changes which would affect the family's eligibility for child care benefits, including family income, employment, participation in a program of education or training, or household composition, or relocation to another county. Such changes shall be reported by the caretaker within ten days of the date the change occurred.

RETURN THIS FORM TO:

MUSKINGUM COUNTY DEPARTMENT
OF JOB AND FAMILY SERVICES
P.O. BOX 100
ZANESVILLE, OHIO 43702-0100

ATTENTION: CHILD CARE AIDE
TELEPHONE: (740) 454-0161
1-800-242-0029

DATE OF TEMPORARY CHANGE: _____ DATE OF PERMANENT CHANGE: _____ DATE OF CHILD'S LAST DAY: _____

NAME OF PARENT

SS#

TELEPHONE#

NAME OF PROVIDER

SS#

TELEPHONE#

The above named provider shall show changes of hours/days for the following children as listed below:

CHILD'S NAME	SOCIAL SECURITY#	DAYS & HOURS OF CARE EXAMPLE: (M,W,F 6am-6pm); (T,TH 6am - 12pm)
1.		
2.		
3.		
4.		
5.		

Please complete this form as changes occur and submit to the Muskingum County Department of Job and Family Services, "NO LATER than (10) days after the change has occurred." It is the responsibility of the caretaker to report any changes and to have all overtime approved by the Child Care Case Manager prior to the date of care. Please be advised that we are not always aware when children are no longer coming to your home. We appreciate your assistance!

Examples of changes to report, but not limited to:

Temporary Change: College and/or work schedule, please do not include varied work schedules. (i.e.: fast food or shift changes.)

Permanent Change: Job change resulting in change of hours/days, etc.

Child's Last Day: Last day of child care service in your home.

OFFICE USE ONLY:
____ CASE MGR'S COPY
____ CERT SPEC'S COPY