

## **RCC CHILDCARE ELIGIBILITY GUIDELINES**

### ***To be eligible for RCC's Childcare Program students must:***

- Be enrolled in either a degree or diploma program.
- Be enrolled 12 daytime credit hours or more on the RCC campus.
- Be in good academic standing according to RCC's academic policies
- Be eligible for full Pell Grant funding through the Department of Education.
- Submit copies of each child's birth certificate and social security card being considered for childcare assistance.
- Not be receiving any other financial assistance with childcare (DSS or other government assistance)!

**\*Applications are reviewed based on need, completeness, and date received. All students who qualify for assistance will not be able to receive funding due to limited funds, but every effort will be made to assist as many students with the limited funding the RCC Financial Aid Office receives.**

### **Students who are selected for childcare assistance:**

- Must select a state approved childcare facility.
- Must have the childcare facility complete all necessary paperwork and return it to the RCC Financial Aid Office.
- Must understand that any changes to the student's schedule must be reported to the RCC childcare coordinator
- Must understand that childcare funds may exhaust before the end of the school year and plan accordingly.

Financial Aid Office

## *Childcare Assistance Application*

**A. Student's Information**

Student's LastName	Student's FirstName	Student's M. I.	Student's Social Security Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

**B. Children in Need of Childcare**

Name	Social Security Number	Age
Name	Social Security Number	Age
Name	Social Security Number	Age
Name	Social Security Number	Age

List the number of people in your household: \_\_\_\_\_

Are you currently employed? [ ] Y or N [ ]

Employer Name: \_\_\_\_\_

Please check any of the following you have received in the past year:

- SSI/Disability
- SNAP Benefits (Food Stamps)
- TANF
- Unemployment Compensation
- WIC

Do you currently receive any other childcare assistance? [ ] Y or N [ ]

**C. Signatures**

**I certify that all information on this application is true and correct.**

Signature of Applicant	Date
Signature of Applicant	Date

Financial Aid Office

Student Name: \_\_\_\_\_

Student SSN: \_\_\_\_\_

***FOR EQUAL OPPORTUNITY STATISTICAL PURPOSES ONLY***

**Gender:**

- Male
- Female

**Ethnic Background:**

- Native American
- African American
- Caucasian
- Hispanic
- Bi-racial
- Other (please specify) \_\_\_\_\_

**Marital Status:**

- Single
- Married
- Separated
- Divorced

**Course of Study (Major):** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Submit this document to the financial aid administrator at your school.*

*You should make a copy of this document for your records.*

**Robeson Community College / Financial Aid Office / PO Box 1420 Lumberton, NC 28360**

Completed form may be faxed to 910.272.3334 or emailed to: [dkauba@robeson.edu](mailto:dkauba@robeson.edu)