

Child Care Works

School-Age Blended Rate Payment Policy

2020-21 School Year



**EARLY LEARNING
RESOURCE CENTER**
OFFICE OF CHILD DEVELOPMENT AND EARLY LEARNING

Because some children will not return to a five-day-a-week, in-person school schedule, child care providers may provide additional hours of care during the school year.

This form must be completed in its entirety and returned to ELRC Region 17 for any school-age child needing additional child care hours for the 2020/2021 school year.

Parent Name:	
Record Number:	
ELRC Caseworker:	
School District:	
Effective Date of Change:	
Child Care Provider:	

Child's Name:				
WEEK 1 <i>Select format of school instruction for every day of the week:</i>				
Monday	Tuesday	Wednesday	Thursday	Friday
<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING
WEEK 2 <i>Select format of school instruction for every day of the week:</i>				
Monday	Tuesday	Wednesday	Thursday	Friday
<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING	<input type="checkbox"/> VIRTUAL (FT rate) <input type="checkbox"/> IN-PERSON (PT blended) <input type="checkbox"/> NOT ATTENDING

Parent/caretaker signature & date: _____

