Today's Date: _____

Valley Interfaith Child Care Center, Inc.

948 Heather Drive, Blacksburg, Va 24060
540-951-8101

Application

Child's Information

Child's Full Name_____ Date of Birth_____
First Middle Last

Address_____

( ) Male ( ) Female Any documented Special Needs ( ) yes ( ) no

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Mother's Information

Name_____ Date of Birth_____ Lives with child: ( ) yes ( ) no

Employer/School_____ Total Work Hours_____

Work Phone Number_____ Home Phone Number_____Cell Phone_____

Education Level: GED/Diploma Some College BA/BS Currently in School: ( ) yes ( ) no
(Circle one) ( ) Full Time ( ) Part Time

Father's Information

Name_____ Date of Birth_____ Lives with child: ( ) yes ( ) no

Employer/School_____ Total Work Hours_____

Work Phone Number_____ Home Phone Number_____Cell Phone_____

Education Level: GED/Diploma Some College BA/BS Currently in School: ( ) yes ( ) no
(Circle one) ( ) Full Time ( ) Part Time

Child's Legal Guardian ( ) Mother ( ) Father ( ) Both ( ) Other (see below)

Legal Guardian's Information

Name_____ Date of Birth_____

Employer_____ Total Work Hours_____

Work Phone Number_____ Home Phone Number_____

Lives with child: ( ) yes ( ) no

Others In Household

Name	Relationship to Child	Date Of Birth

If documented Special Needs, please explain:

_____
_____
_____
_____
_____

Income Verification (To be filled out by staff member)

Amount_____ Source_____ Family Member_____

Amount_____ Source_____ Family Member_____

Amount_____ Source_____ Family Member_____

Staff Comments:

_____
_____
_____
_____

Office Use Only

Points Received

INCOME (Yearly) _____

Family Size	40 pts	20 pts	0 pts
1	0-12,441	12,442-17,705	17,706 +
2	0-16,679	16,680-23,736	23,737+
3	0-20,917	20,918-29,767	29,768+
4	0-25,155	25,156-35,798	35,799+
5	0-29,393	29,394-41,829	41,830+
6	0-33,631	33,632-47,860	47,861+
7	0-37,869	37,870-53,891	53,892+
8	0-42,107	42,108-59,922	59,923+

WORK/SCHOOL _____

Work (hours/week): 30+ hours = 60 pts
20-30 hours = 40 pts
Under 20 hours = 20 pts

School: Full Time = 40 pts
Part Time = 20 pts

If working and in school, add points from both columns.
Double points for single parents.

EDUCATION LEVEL _____

No GED/Diploma	60 pts
Has GED/Diploma	40 pts
Some College/Associate's Degree	20 pts
Bachelor's Degree or above	0 pts

SPECIAL NEEDS _____

Check all that apply –10 pts each

( ) Documented disability
( ) Valid IFSP
( ) Child Health Problems
( ) Family Risk (terminal illness, death of household member, domestic abuse, parent incarcerated)
( ) Abuse/Neglect (child)
( ) Referral from other agencies/professionals
( ) Grandparent has custody
( ) Teen Parent
( ) Homeless/Shelter

HEAD START ELIGIBLE _____

Yes = 20 pts
No = 0 pts

DSS APPROVED CHILD CARE _____

Yes = 20 pts
No = 0 pts

Total Points Received _____ Staff Initials_____