CACFP Income Eligibility & Enrollment Form Attachment – Additional Children & Household Members

This form is **only** to be utilized when more than four (4) children are enrolled and attend the child care center OR there are additional household members in the home. This form ***must be attached to NS-100-C***. Please do not duplicate names of children listed on Part 1 of the Income Eligibility and Enrollment Form or duplicate the names of household members listed in Part 3b.

Complete this section for any children enrolled in the center **not listed** on Part 1 of NS-100-C.

Last Name, First Name	Date of Birth	Enroll Date	Times of Care (Usual)		Regular Days of Care							Meals Served During Care						Ethnicity/ Race*		Foster Child	Head Start
			Arrival Time	Leave Time	M	T	W	T	F	S	S	B	AM	L	PM	D	EV	Ethnic	Race		
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Complete this section for any household member **not listed** on Part 3b of NS-100-C.

List the Names of All Household Members not listed in Part 1	GROSS INCOME BEFORE ANY DEDUCTIONS (Net for Self Employed) W=Weekly E2=Every 2 weeks 2M=Twice monthly M=Monthly Y=Yearly								Check If ZERO income
	Earnings from Work		Welfare, Child Support, Alimony		Pensions, Retirement, Social Security		All Other Income		
	How much?	How often?	How much?	How often?	How much?	How often?	How much?	How often?	
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INSTRUCTIONS TO CHILD CARE CENTERS: Attach this page to NS-100-C for this household. Include enrolled children and all household members when making income eligibility determinations.