

# Childcare Benefit Policy for All Staff Members

*Updated: November 1, 2024*

**Objective:** The Children's Center is committed to supporting our dedicated staff by offering childcare benefits to eligible employees. This policy outlines the procedures and requirements for new staff members who wish to take advantage of the childcare benefits.

**Eligibility Criteria:** All staff members are eligible to apply for free childcare benefits. Because we have a limited number of reduced/free spots, we ask all of our staff members who want free or reduced childcare to agree to the following.

**Application Process:** Staff members meeting the eligibility criteria are required to follow the application process outlined below:

- 1. CDC or Tri-Share Application:** All staff must apply for one of the following, depending on income qualifications:
  - Submit a CDC application for childcare benefits prior to the start date of your child/children. Detailed guidance on the application process can be obtained from Jared Wardlaw, our designated point of contact for assistance.
  - Submit a Tri-Share application for childcare benefits within one week of receiving your first full paycheck. Link to apply: [https://uwnwmi.chobiit.us/public/p\\_add\\_record.html?appId=11](https://uwnwmi.chobiit.us/public/p_add_record.html?appId=11)
- 2. Income Documentation Exception:** Alternatively, if a staff member can provide documentation proving that their income exceeds the qualifying income level for the size of their family, they will be exempt from the CDC / Tri-Share application requirement.
- 3. Out-of-State Staff:** Staff members residing outside of Michigan will not be required to apply for CDC or Tri-share benefits, as they would not qualify.

**Procedure for Income Documentation Exception:** Staff members seeking an exemption based on income documentation must follow this procedure:

1. Submit relevant income documentation to the designated Human Resources contact.
2. HR will review the documentation to ensure it meets the qualifying criteria.
3. Upon verification, the staff member will be exempt from the CDC application requirement.

**Communication and Support:** Staff members with questions or concerns about the application process, documentation, or eligibility are encouraged to reach out to Mary Wardlaw for assistance. Open communication is vital to ensuring a smooth and supportive process.

**Continuation of Childcare Benefit:** Adherence to the application process or provision of income documentation is crucial to sustaining the childcare benefit for all eligible staff members. Failure to comply with the outlined procedures may result in discontinuing the childcare benefit.

**Review and Amendments:** This policy will be subject to periodic review, and amendments may be made as necessary. Any updates or changes will be communicated to staff members in a timely manner.

**The Children's Center / Montessori Children's Center  
Childcare Benefit Application Form for Staff Members**

**Employee Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Date of Employment:** \_\_\_\_\_ **Child's Name(s):** \_\_\_\_\_

Household Size \_\_\_\_ People | Combined Household Monthly Income \$ \_\_\_\_\_ (Proof of income required)

**Childcare Benefit Selection**

Please select one of the following options:

1. **CDC Childcare Assistance**
  - I am applying for CDC childcare benefits. **Date of CDC Application:** \_\_\_\_\_
2. **Tri-Share Childcare Assistance**
  - I am applying for Tri-Share childcare benefits. **Date of Tri-Share Application:** \_\_\_\_\_
3. **Exempt**
  - I am applying for an exemption from CDC/Tri-Share.
  - Reason for Exemption:**
    - Out-of-State Resident
    - Income Level Exceeds Qualifying Criteria (attach income documentation)

**Employee Acknowledgement**

I understand that to receive free childcare, I must apply for CDC or Tri-Share, or apply for an exemption based on the above criteria. I acknowledge that failure to comply with these requirements may result in the loss of my childcare benefit.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*To be completed by Human Resources*

**Income Verification (for Exempt Due to Income):**

1. **Proof of Income Attached:**
  - Yes
  - No
2. **Income Level Verified By HR:**
  - Exceeds Qualifying Threshold for CDC/Tri-Share
  - Within Qualifying Threshold for (circle one) CDC / Tri-Share

**HR Approval**

- **Application Status:**
  - Approved – No Staff Contribution is Required
  - Denied – Staff Contribution is Required
  - HR Representative Signature:** \_\_\_\_\_
  - Date:** \_\_\_\_\_

**For Assistance:**

Please contact Jared Wardlaw (CDC questions) or Mary Wardlaw (Tri-Share questions, application process and documentation questions) with any inquiries.