



**HUCTW/Harvard University  
Childcare Fellowship Application Form  
January 1, 2009 – December 31, 2009**



*Applications are due Friday, September 26, 2008.  
Please complete all fields.*

**Name** \_\_\_\_\_

**Harvard ID** \_\_\_\_\_

**Daytime phone** \_\_\_\_\_

**Preferred email address** \_\_\_\_\_

**School/Department** \_\_\_\_\_

**Home address** \_\_\_\_\_  
\_\_\_\_\_

**How many people live in your household?**

**Adults** \_\_\_\_\_ **Children** \_\_\_\_\_

**Spouse/Partner:** **Name:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Is your spouse/partner employed by Harvard?**      **Yes**      **No**

**If yes, will s/he apply to another childcare fund?**      **Yes**      **No**

**If yes, which one?** \_\_\_\_\_

**Adjusted gross Household income from your 2007 tax return** \_\_\_\_\_

**Estimated adjusted gross household income for 2009** \_\_\_\_\_

**Please add any other information that would be helpful for us to know.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Childcare arrangement information**

Applicant's name \_\_\_\_\_

Please list all children for whom you are applying

	Child's first and last name	Date of Birth
1.		
2.		
3.		
4.		
5.		

Please list all childcare providers and license numbers (or social security numbers)

	Provider's name	Arrangement confirmed? (Y/N)	License or Social Security #
1.			
2.			
3.			
4.			
5.			
6.			

Please list **total** monthly cost for **all children** from **all providers**. If an arrangement is tentative, please estimate the cost. We will make an award based on the estimated costs and may change the award accordingly once costs are confirmed.

	Total monthly cost		Total monthly cost
January 2009		July 2009	
February 2009		August 2009	
March 2009		September 2009	
April 2009		October 2009	
May 2009		November 2009	
June 2009		December 2009	

- I have completed and signed my application.
- I have attached the first page **only** of my federal 2007 tax return. (Do not send copies of your W2s).
- I have kept a copy of this application for my records.
- I am submitting my application by Friday, September 26, 2008.

I certify that the information on this form is complete and correct.

Signature \_\_\_\_\_

Date \_\_\_\_\_