

**THE DEPARTMENT OF EARLY EDUCATION AND CARE (EEC)
SUBSIDIZED CHILD CARE
Household Composition Statement**

Household Rules for Subsidized Child Care:

- Parents must report all the members of their household as a part of their subsidy application. I understand that I may need to provide documentation for the people listed below.
- Parents must report any changes in who they live with if the change lasts more than 30 total days during a 12 month Authorization.
- A parent who gives false or misleading information may:
 - Be investigated for fraud;
 - Lose their child care subsidy; and/or
 - Have to repay the cost of child care paid on your behalf by EEC.
- The following is a list of people who would count as a member of my household:
 - My spouse, even if they are not related to my children;
 - The other parent of my child who lives in the home with me;
 - My child(ren) who are younger than 18 years old;
 - My child(ren) who are younger than 24 years old if the child is in school full time; and
 - Any relative of my child (Sibling, aunt, uncle, or grandparent) who lives in my home who is financially dependent on me and is claimed as a dependent on my tax returns.
- If you have questions on who will count, please ask the agency confirming your child care eligibility.

Please read carefully and mark "X" on all that apply:

- I Am Legally Married
If yes, spouse's name and date of birth: _____
- I Live with My Child(Ren)'s other parent
If yes, Father/Mother's Name and Date of Birth: _____
- I Am Legally Divorced
- I Am Widowed
- I Am Legally Separated From My Legal Spouse
If yes, Spouse's Name and Date of Birth: _____
- I Am Informally Separated From My Legal Spouse
If yes, Spouse's Name and Date of Birth: _____
- I Do Not Live With The Father/Mother Of My Child(Ren)

I live with these family members (add names on the back if there are not enough rows):

Full Name	Date of Birth	Relationship To Me

I swear under penalty of perjury that this information is correct and complete.

Signature

Date

Print Name

Last 4 digits of Social Security Number