

# School Readiness Program



## WE HELP PAY FOR CHILD CARE & AFTER CARE

★ **Income-eligible program that helps families pay for childcare and after care (birth to 13 yrs old)**

★ **Families must pay a copayment for childcare based on income and family size.**

★ **Must be a Broward resident either working (at least 20 hrs per week), or in school or have a documented disability**

★ **Other eligible children: special needs, at-risk, homeless, domestic violence victims, low-income migrant families, farm workers, or working with referring agency**

**Apply Today!**

**FREE assistance with completing application**


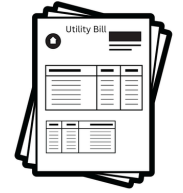

Call 954-377-2188 or visit [ELCBroward.org/Childcare](http://ELCBroward.org/Childcare)

Thank You To Our Partners!



**ELC Broward can also help you find the best childcare options for their family for free**

**You are required to submit a copy of the following documents as part of the redetermination process:**

 <p style="text-align: center;"><b>Identity</b></p> <ul style="list-style-type: none"> <li>• Provide one of the following for all parents living in household:             <ul style="list-style-type: none"> <li>o Valid FL Driver’s License or Government ID</li> </ul> </li> <li>• Provide <b>one</b> of the following for child/ren <u>who will receive care</u>:             <ul style="list-style-type: none"> <li>• An original/certified copy of child’s United States birth certificate</li> <li>• A United States passport</li> <li>• Copy of child’s resident card</li> <li>• Citizenship/naturalization certificate</li> <li>• Lawfully admitted alien documents (i.e. I94, I 94A, I 97, I 551, and I 766 with non-US passport).</li> </ul> </li> </ul> <p><b>NOTE:</b> Proof of legal status is required for all children receiving child care assistance.</p>	<p style="text-align: center;"><b>Education (if applicable)</b></p> <p>Provide one of the following for parent/s enrolled in school</p> <ul style="list-style-type: none"> <li>o Official current class schedule showing credit</li> <li>o hours, days &amp; times of classes</li> </ul> <p>Official school letter on letterhead with an official seal stating the number of class hours and lab hours, date the semester/period of training starts and the date it ends, as well as expected date of graduation.</p>
 <p style="text-align: center;"><b>Residency</b></p> <p>Provide one of the following to verify where you live:</p> <ul style="list-style-type: none"> <li>o Utility bill (electric, gas, water), cable, internet or home phone bill dated within 12 months of your child’s application date</li> <li>o Valid &amp; signed residential rental agreement or receipt from rent payment dated within 12 months of your child’s application date</li> <li>o Mortgage Statement dated within 12 months of your child’s application date</li> <li>o Tax assessment showing homestead exemption</li> <li>o Current mail from FOOD Stamps/Medicaid (within past 30 days)</li> <li>o Food Stamp Letter/Notice of Case Action for TANF (cash assistance) within 12 months of your application.</li> <li>o Paystubs – current and consecutive (last 4 weeks of paystubs).</li> <li>o If living with someone: Provide their residency document and a notarized letter written by them confirming their address and that you and your child(ren) live in their home.</li> </ul>	<p style="text-align: center;"><b>Child Documentation</b></p> <p>Provide one of the following for <u>all</u> children living in your household:</p> <ul style="list-style-type: none"> <li>o An original/certified copy of child’s birth certificate</li> <li>o An original/certified copy of the child’s baptism/other religious certificate <u>with</u> an affidavit stating the certificate is true/correct</li> <li>o A life insurance policy which has been in effect for at least 2 years</li> <li>o A passport/certificate of arrival in the U.S.</li> <li>o Immunization record signed by health officer/licensed physician</li> <li>o Valid military dependent identification card</li> <li>o Proof of guardianship – court ordered documents</li> </ul> <p><b>NOTE:</b> Child documentation is needed for ALL CHILDREN residing in the household. <b>Those receiving care and NOT receiving care.</b></p>
 <p style="text-align: center;"><b>Employment</b></p> <p>If you are working 20 hours or more per week, please provide one of the following:</p> <ul style="list-style-type: none"> <li>o Current/consecutive paystubs: Your last (4) weekly paystubs; or two (2) bi-weekly paystubs; or two (2) semimonthly paystubs, or one (1) monthly paystub</li> <li>o Income Verification Form completed/signed by your employer reflecting last 4 weeks of income.</li> <li>o If you are self-employed or paid in cash: last year’s income tax return, with business ledger and/or Schedule C, work calendar (schedule) with receipts for transactions listed on calendar</li> </ul> <p><b>NOTE:</b> If paid with paystubs, copies of paystubs <b>MUST</b> be provided.</p>	<p style="text-align: center;"><b>Family Size</b></p> <p>Provide documents for other family members you would like to be included in your family size:</p> <ul style="list-style-type: none"> <li>o <b>Proof of age is needed for ALL CHILDREN living in the household.</b></li> <li>o Photo ID for adult family members</li> <li>o Proof of other household income</li> <li>o If separated: notarized letter stating date of separation, spouse’s name, address, and phone number. Proof of address from absent parent is needed in the form of a utility bill or lease. If spouse’s whereabouts are unknown, provide a written notarized letter stating that the whereabouts are unknown. The letter must be dated and signed.</li> <li>o If divorced: Divorce papers</li> </ul>
<p style="text-align: center;"><b>Earned/Unearned Income</b></p> <p>Please provide any of the following if applicable:</p> <ul style="list-style-type: none"> <li>o Current award letter/print out of any Social Security benefits explaining reason income is awarded. If disabled, provide Social Security letter</li> <li>o Physician disability statement confirming parent/guardian is exempt from work requirement and providing recommendation for child care (must be dated/signed by physician)</li> <li>o Food Stamp Letter/Notice of Case Action for TANF (cash assistance)</li> <li>o Current printout from Child Support Enforcement</li> <li>o If child support is not paid through Child Support Enforcement: Submit ELC’s Child Support Statement</li> </ul>	



**Gross household income at or below 55% of State Median Income (SMI)**

- a. Family of **1 person** = \$29,476 or less
- b. Family of **2 people** = \$38,546 or less
- c. Family of **3 people** = \$47,615 or less
- d. Family of **4 people** = \$56,685 or less
- e. Family of **5 people** = \$65,754 or less
- f. Family of **6 people** = \$74,824 or less

**July 1, 2025 - June 30, 2026**