NORTHWEST CHRISTIAN UNIVERSITY

Wisdom · Faith · Service

2016-17 CHILDCARE EXPENSE WORKSHEET

Completion of this worksheet is required for consideration to include childcare expenses in your educational budget for the 2016-17 academic year. Fill out all sections and submit the form to the Financial Aid Office.

Student Name: _____ SSN: _____

Address: _____

Street City State Zip Code

Phone/Cell: _____ Email: _____

ENROLLMENT DATA:

List actual or estimated credits for each term you will be enrolled and requiring childcare. These credits will be utilized to help determine the total eligible childcare expense.

Summer 2016 Credits:	Fall 2016 Credits:	Spring 2017 Credits:	Summer 2017 Credits:
On Campus: _____	On Campus:_____	On Campus:_____	On Campus: _____
Online: + _____	Online: + _____	Online: + _____	Online: + _____
Total: = _____	Total: =_____	Total: =_____	Total: =_____

EXPENSE INFORMATION:

The student/provider is responsible to translate monthly or weekly fees or multi-child pricing into an hourly rate per child. Use comment field to note any particular circumstances that require special/more expensive care.

Child/Dependent Name	Age	Expense Amount	Comments (optional)
_____	____	$_____/per hour	_____
_____	____	$_____/per hour	_____
_____	____	$_____/per hour	_____

CARE PROVIDER INFORMATION:

Name: _____ City/State:_____ Phone:_____

Type (check one): ☐ Individual ☐ Company (list name):_____

By signing below, the student certifies that the information provided on this worksheet is a true reflection of childcare obtained/costs being incurred as a result of college attendance.

Student Signature: _____ Date: _____

The childcare provider certifies that the student listed above is currently receiving childcare services as noted above.

Care Provider Signature: _____ Date: _____