



# KIA Licensed Child Care Subsidy Program

## PROGRAM DESCRIPTION

The KIA Licensed Child Care Subsidy Program is designed with two purposes:

1. To encourage the use of licensed child care centres in the Kitikmeot region
2. To assist eligible working Kitikmeot Inuit with the financial cost of enrolling their children in licensed child care facilities.

## PROGRAM ELIGIBILITY

The parent who registers the child must:

1. Be registered with the Kitikmeot Inuit Association under the Nunavut Agreement
2. Be employed while the child is attending a licensed child facility
3. Have legal custody of the enrolled child at least 50% of the time

*\* If you are receiving subsidies for childcare through other organizations (eg. another Inuit Association, Provincial/Territorial government, etc.) you may be ineligible for this program. These situations will be reviewed on a case by case basis to determine eligibility. \**

## SUBSIDY PAYMENT

For licensed childcare facilities in the Kitikmeot region, subsidies will be paid directly to the provider and parents will be required to pay the remaining amount.

For facilities outside of the Kitikmeot region, parents must pay all costs and submit invoices and receipts for reimbursement.

Indirect childcare costs (eg. deposit, waitlist fees, late fees, etc.) are not covered under this program.

When applicable, Registration Fees will be included on approved applications.

## APPLICATION PROCEDURES

Applications to the Licensed Child Care Subsidy Program must include:

- Completed and signed application form
- Copy of applicant's identification (birth certificate, health care card, driver's license, etc.)
- Copy of identification for all dependents claimed (ie. birth certificate, health care card, etc.)

For facilities outside the Kitikmeot Region, please submit:

- Banking direct deposit form
- Letter from the licensed child care facility that identifies:
  - names of children enrolled
  - expected daily or monthly costs
  - enrollment status (full-time, part-time, drop-in)

## SUBMITTING APPLICATIONS

Within the Kitikmeot Region	Outside the Kitikmeot Region
<p>Submit completed applications to your local child care facility or e-mail to <a href="mailto:legotak@kitia.ca">legotak@kitia.ca</a></p> <p>If you have questions please see the Daycare Manager or contact the Child Care Coordinator at 867-983-2458 Ext. 1007 or toll-free at 1-833-854-0062</p>	<p>Submit completed applications to the KIA Child Care Coordinator <a href="mailto:legotak@kitia.ca">legotak@kitia.ca</a></p> <p>If you have questions contact the Child Care Coordinator at 867-983-2458 Ext. 1007 or toll-free at 1-833-854-0062</p>

**\* full program details including eligibility and application procedures can be found in the KIA's Licensed Child Care Subsidy Guidelines**

## Application Checklist

**\*\* If you are eligible for government child care subsidies you must apply to those first \*\***

Please ensure you have all the following items before submitting your application.

All Applications		
<input type="checkbox"/>	Completed Application Form	Fully filled in attached application form. If you have any questions please speak the daycare manager (for facilities in the Kitikmeot region) or the KIA Child Care Coordinator (for facilities outside the Kitikmeot region)
<input type="checkbox"/>	Copy of Applicant's Identification	Any government issued ID such as a birth certificate, health care card, driver's license or passport
<input type="checkbox"/>	Copy of each dependent's identification	For each dependent listed on your application form please provide a copy of their government issued ID such as a birth certificate or health care card
For those outside the Kitikmeot Region		
<input type="checkbox"/>	Banking Direct Deposit Form	A void cheque or direct deposit form for the bank account where you would like your reimbursements deposited
<input type="checkbox"/>	Letter from the Licensed Child Care Facility	<p>The letter must include:</p> <ul style="list-style-type: none"> <li>● Full names of each child you'll be claiming the subsidy for</li> <li>● Expected daily or monthly costs for each child</li> <li>● Enrollment status of each child (full-time, part-time, drop-in)</li> <li>● Facility contact information</li> </ul>

## KIA Licensed Child Care Subsidy Program

# Application Form

## PARENT INFORMATION (as shown on your ID)

To be completed by the eligible **Kitikmeot Inuit parent or Inuit legal guardian** who is registering for the KIA Licensed Child Care Subsidy Program and is working

Last Name		First Name	
Preferred Last Name (if applicable)		Preferred First Name (if applicable)	
Parent Status	Married/common-law Married/common-law with student spouse* Single * This information will help us direct you to the most appropriate program for your needs		
Employment Status	Full-time Part-time Casual	Job title and place of employment?	
This program is only for working parents If you are a student contact our Employment Services Coordinator at <a href="mailto:nmaksagak@kitia.ca">nmaksagak@kitia.ca</a> for more information			
NTI Number		Community applicant is registered with under the Nunavut Agreement	Cambridge Bay Gjoa Haven Kugaaruk Kugluktuk Taloyoak

## MAILING ADDRESS / CONTACT INFORMATION

Mailing Address		Postal Code	
Town/City		Territory/Province	
Email Address		Phone Number	

## ADDITIONAL SUBSIDIES

Has any parent <b>applied for</b> or <b>received</b> a child care subsidy from other sources (eg. government, employer, other RIAs)	Yes	No
If yes, please provide documentation from the subsidy provider that shows the details of the subsidy		

**CHILDREN REQUIRING SUBSIDY**

<b>Child #1</b>			
Last Name		First Name	
Date of Birth		Relationship to applicant	
Living with you at least 50% of time	Yes      No	Name of Licensed Child Care Facility	
Registration Status	Full-Time Part-Time Drop-In	If not full-time, how many days (on average) will the child go each week	

<b>Child #2</b>			
Last Name		First Name	
Date of Birth		Relationship to applicant	
Living with you at least 50% of time	Yes      No	Name of Licensed Child Care Facility	
Registration Status	Full-Time Part-Time Drop-In	If not full-time, how many days (on average) will the child go each week	

<b>Child #3</b>			
Last Name		First Name	
Date of Birth		Relationship to applicant	
Living with you at least 50% of time	Yes      No	Name of Licensed Child Care Facility	
Registration Status	Full-Time Part-Time Drop-In	If not full-time, how many days (on average) will the child go each week	

## DECLARATION, AUTHORIZATION TO RELEASE INFORMATION & PROGRAM AGREEMENT:

### Please read the following and sign where indicated:

1. I understand that meeting the eligibility requirements does not guarantee funding. The actual amount of money received will be based on ELCC funds available when the application is reviewed. The KIA may amend the terms of the program with 60 days notice.
2. I agree to repay the amount of any financial assistance to which I am not entitled such as, but not limited to: any payments made to me in error; and/or any payments made for costs in excess of the amount actually incurred; and/or any payments that were used for costs that were not eligible for reimbursement under the contribution agreement.
3. I declare that the information given above is true, correct, completed and understand that it may be subject to verification. I understand that it is an offence to make false statements.
4. I authorize Kitikmeot Inuit Association (KIA) at any time to request information regarding my child's enrollment, attendance or participation in a licensed child care program or custody arrangements related to my child.
5. I hereby authorize KIA to release and/or request information as required from Nunavut Government Department of Family Services, Department of Education, other subsidy providers and my childcare provider to determine my eligibility for the program and for verification purposes throughout the duration of the program.
6. I understand that the KIA may share the above information with the Government of Canada (GOC), and that I consent to the disclosure of this information to GOC. I understand that the information that I provided is protected under Canada's Privacy Act and that I have a right under the Privacy Act to obtain access to that information from GOC.
7. This authorization will remain in effect UNLESS I give written instruction to cancel the authorization.

### Please read and check the boxes below to confirm the following

I declare that all children listed on this application form:

Live with me at least 50% of the time

Are financially dependent on me

Are under 12 years of age and attending a licensed child care facility

Are my child, stepchild, adopted child or a child I have legal custody or guardianship of

I will let the KIA know if there are:

Changes to my child(ren)'s custody arrangements

Changes to day care arrangements (change daycares, attendance schedule or day care rates)

Changes to my employment status (where you are no longer working OR are on a long-term that is more than one month)

By signing this application form, you have read and understood the *DECLARATION & AUTHORIZATION TO RELEASE INFORMATION* written on this form.

\_\_\_\_\_  
*PRINT Applicant Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*