The purpose of the Project is to provide financial assistance for quality childcare to eligible student-parents pursuing an approved degree or certificate pathway in a healthcare-related career or K-12 Education. **Preference** will be given to students enrolled in a degree or certificate program in **Nursing, Early Childhood Education, K-12 Education, or a related field.**

**Eligibility Requirements:**
The following eligibility requirements must be uploaded or received along with this application:

- **Students must maintain enrollment** at AWC and a passing grade of a minimum of 2.0 each semester to remain eligible for funding through the HECCP assistance.
- **Proof of Arizona schools** of grades K-12 enrollment. *(If applicable), or*
- **Proof of Arizona residency** (valid Arizona driver’s license or current Arizona motor vehicle registration), or Arizona voter registration, Arizona utilities, or Military Form (2058).
- **Parents:** Parent or legal guardian of a dependent child(ren) ages birth through twelve (12) and Arizona resident. Proof of residency will be required at time of application.
- **Child:** Legal dependent child(ren) ages birth through twelve (12) (this includes children by birth or adoption, foster children, and children by court order if proper identification is provided). Birth certificates will be required at time of application to determine child(ren) age and legal guardian evidence will be required in cases of guardianship.
- **Child Care Providers:** Is inclusive of ADES Certified Family Child Care Homes, ADES Contracted Child Care Centers and Group Homes that are regulated by the Arizona Department of Health Services (ADHS) and hold a current registration agreement with ADES, and Child Care Providers that are licensed and regulated by the ADHS. Child care providers must be a licensed or certified provider listed on the Arizona Child Care Resource & Referral website. Regulated providers can be found by using the “Search for Child Care” and “Advanced Search Criteria” prompts on the Child Resource and Referral (CCR&R) website (azccrr.com). To narrow the search, enter the city and/or zip code for which child care is being sought.
  - As the selection of child care is the exclusive responsibility of parents, the child care provider chosen will be asked to confirm certain information. This includes confirming the provider meets the description of a qualifying child care provider as described in the program guidelines, and regarding reimbursement-related submittals for child care service occurring in all corresponding academic years.
    - Child care programs not eligible for NAU’s HECCP are those:
      - Offering experiences as “recreational” opportunities not meeting “Qualifying Child Care” descriptions;
      - At schools without the supervision of state or local education authorities (e.g., “private schools”);
      - Where participants are allowed to sign themselves in/out; and/or
      - That reflect non-child care tuition.
- **Dual Eligibility:** If a student-parent has dual eligibility with both DES child care assistance and AWC HECCP child care reimbursements, DES child care assistance will be the payor of first resort, and any child care costs not covered by DES can then be covered by the AWC HECCP. To verify whether a student is currently receiving DES child care assistance, and what their authorized amount of assistance is, the AWC HECCP will request the student provide a copy of their Provider/Parent/Guardian’s Agreement for Child Care Charges. Student-parents who receive DES child care assistance will be required to provide their Provider/Parent/Guardian Agreement for Child Care Charges prior to being enrolled in the AWC HECCP.
- **Employment:** If a student-parent is enrolled less than full-time, they will need to demonstrate proof of employment in a work activity for monetary compensation during all terms of requested reimbursements. Student-parents enrolled full-time at AWC do not have a work requirement.
Program Requirements:
- Attend one parent orientation and workshop.
- To provide the AWC Project Manager with a current copy of the college school schedule and unofficial transcript at the beginning and at the end of each semester.
- To provide childcare providers with the college school schedule and other needed documentation for enrollment in their program.
- To provide updated information to the AWC Program Manager of any changes related to the number of children registered for funding assistance.
- To provide AWC verification if receiving any DES Child or any ADES Child Care Assistance prior to reimbursement from HECCP.

Application

☐ New Applicant  ☐ Returning Applicant

Please select the terms for which you seek childcare assistance for dependent children ages birth to twelve (12) years of age.

☐ Fall 2023  ☐ Spring 2024  ☐ Summer 2024  ☐ Other

Student Information (Please Print)

Last Name: ___________________________  First Name: ___________________________  Student ID#: _________

Mailing Address: ________________________________________________________________

City: ___________________________  State: _________  Zip code: ___________________________

Phone Number: ___________________________  Email address: ___________________________

AWC Enrollment Status

AWC Enrollment:  ☐ Full-time  ☐ Part-time  Major: ___________________________

Current GPA: _________  Expected Graduation Year? _________

Do you plan to transfer to a 4-year college after graduation from AWC?  ☐ Yes  ☐ No

Financial Information

Do you receive financial aid?  ☐ Yes  ☐ No

If yes, what forms?  Pell Grant ☐  Other ☐

Are you the parent or legal guardian for one or more children between the ages of Birth – 12?  ☐ Yes  ☐ No (If no, please explain): ___________________________

Do you need childcare services while you attend classes at AWC?  ☐ Yes  ☐ No

If yes, daytime services ☐  evening services ☐

Child Care Program Information

Is your child currently attending a state-licensed childcare center?  ☐ Yes  ☐ No

If yes, where? ___________________________

Contact Name: ___________________________  Phone: ___________________________

HECCP Project Application, 7/31/23
Complete the following for the children you wish to receive HECCP funding for:

<table>
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<tr>
<th>Child’s Name (Print)</th>
<th>Child’s Date of Birth (Month/Day/Year)</th>
<th>Child’s Ages</th>
<th>Start Date for Childcare</th>
<th>Comments (If Any)</th>
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Number of Persons in Household _______
Student Signature: ___________________ Date: ___________________

Documentation Needed:
- Signed Participant Agreement
- Please include a 250 words Essay indicating how being a recipient of this award would benefit you in reaching your Education Goals.

Submission Instructions:
Please submit the required documents by email (shown below) or bring copies to the Yuma Campus Child Care Development Learning Laboratory Center (CDLLC). Additional information is available on the AWC – CDLLC website:
- Student Application Form
- Student Agreement Form
- Proof of Residency
- Recipient Essay

alma.barrandey@azwestern.edu or lizbett.gonzalezderodriguez@azwestern.edu

HECCP Staff Only:

Intake Date: ___________________
Child Care Services for Semester: Fall Spring Summer Year:
Eligibility:
Verified by: Applicant Accepted: Applicant Denied:
Application qualifies for 100% HECCP Assistance
Approval of HECCP Program Director (Signature): Date: