# **Child Care Reimbursement Application**

#### Purpose:

The Mississaugas of the Credit First Nation (MCFN) Department of Lifelong Learning is here to provide resources that support our post-secondary learners allowing them to overcome barriers in their learning journey.

### Objective:

The MCFN Department of Lifelong Learning recognizes that our post-secondary learners may have dependents during their time of attending school. In May 2024, our Chief and Council approved the use of funds to support post-secondary learners with the cost of obtaining child care during their journey. This child care reimbursement application is a prerequisite to obtain funding. Commencing in the 2024-2025 school year, the total amount payable will be \$10.00 per day upon approval and subject to available funds.

## **Eligibility:**

You can apply if your child is under 13 years old (or up to 18 years old if your child has special needs and meets other criteria\*) and in either: a licensed child care program (centre-based, home-based, or in-home services) a children's registered recreation program. Supporting documentation is required to accompany this application.

For the 2024-2025 school year, post-secondary learners will submit proof of child care payment in accordance with the above. Post-Secondary learners will then be reimbursed. An addendum for this benefit will be included in the Post-Secondary Student Assistant Policy and available on the MCFN website.

The provision of this reimbursement support is reviewed annually and subject to available funding.

#### Withdrawal:

If a student withdraws from school, it is the student's responsibility to inform the Post-Secondary Student Advisor within two weeks of the withdrawal. The failure to notify may

result in the requirement to repay for funds advanced.	The failure to notify ma
Details:	
Name:	
Address:	
Applicant's Date of Birth:	

Post-secondary school details (proof of enrollment and duration of attendance): You may attach documentation to this application.		
Names and Dates of Birth of dependent childred cards or birth certificate required for supporting	<del>-</del>	
Name and address of registered child care pro	vider (support letter or invoice/statement)	
Full time or part-time attendance details:		
Daily (and weekly) total cost of child care:		
Date of application:		
Name of applicant (print)	Witness (print)	
Signature of applicant	Witness (signature)	