**INTAKE/RENEWAL TEMPLATE**

HH:

PLACEMENT SCHEDULE:

PP ACTIVITY:

TOTAL HOURS PER WEEK:

OA ACTIVITY:

TOTAL HOURS PER WEEK:

CC NEED HOURS REQUESTED:

CC HOURS REASONABLE ALIGN DISCUSSION:

CC HOURS CROSSES PT/FT THRSHOLD DISCUSSION:

SCHOOL CLOSED NEEDED:

CC HOURS APPROVED:

PROVIDER NAME:

PROVIDER NUMBER:

START DATE:

DISCOUNTS: Family/Employee

NOTE:

REMINDER:

* Only authorize child care in two-parent/ three-generation families for the period of overlap in the parents’ approved activities
* You must confirm with the parent that the self-declared child care need only includes times when all parents are participating in their approved activities (plus travel time, gap time, sleep time), but do not need to document each parent’s schedule

**AUTH TEMPLATE**

PP ACTIVITY:

VERIFIED HOURS:

OA ACTIVITY:

VERIFIED HOURS:

PLACEMENT ARRANGMENT:

CC NEED HOURS REQUESTED:

CC HOURS REASONABLE ALIGN DISCUSSION:

CC HOURS CROSSES PT/FT THRSHOLD DISCUSSION:

SCHOOL CLOSED HOURS:

CC HOURS APPROVED:

PROVIDER NAME

PROVIDER NUMBER/LOC:

AUTH DATES:

REASON AUTH END EARLY DATE:

DISCOUNTS: Family/Employee

EDUCATIONAL TRACKER:

NOTES:

**REPORTED CHANGE TEMPLATE**

OLD JOB END DATE:

NEW JOB NAME/START DATE:

CC NEED HOURS REQUESTED:

KEEP PRIOR HOURS:

CC NEED HOURS APPROVED: