



United Way of Lee, Hendry, Glades, and Okeechobee

CARES Childcare Scholarship Funding Application

Last Name:

First Name:

Childcare Location:

Are you a resident of Lee County? Yes No

Guardian Phone:

Guardian Email:

Child(ren) Name(s):

Have you been: Furloughed as a result of COVID-19?

Experienced cut wages as a result of COVID-19?

Been laid off as a result of COVID-19?

Had to stop working to act as a primary caregiver as the result of COVID-19?

Has your family income been impacted as a result of COVID-19?

Former Employer:

Do you expect to return to your former place of employment? Yes No

If so, anticipated date to return to work:

I hereby certify that my employment status and/or income has been impacted as a direct result of COVID-19. I understand that my funding status will be monitored and that I have secured employment and that childcare will facilitate my return to work. I understand that my funding can be terminated or adjusted at any time. I understand that my child’s attendance will be monitored and if my child fails to consistently attend my scholarship may be discontinued. I understand that United Way of Lee County reserves the right to modify, adjust, or cease scholarship funding at any time to a recipient or provider.

Signature

Date

Please provide a copy of your Driver’s License or ID

Please provide proof of unemployment such as: proof of unemployment registration, furlough notice by your employer, notice of being laid off by employer or documentation of decreased hours and/or wages. Further documentation may be required.

